Filing Fee: \$50.00

ID Number: 69426/



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

	· ·	1.7
1. The	e legal name of the applicant business corporat	ion, limited liability company or limited partnership is:
Vol	hra Wound Physicians of FL, LLC	
2. The	The fictitious business name to be used is Vohra Post-Acute Physicians	
3. The	e state or territory under the laws of which it is in	ncorporated, organized or formed is Florida
4. The	e date of incorporation, organization or formation	n is 10/21/2010
5. If a business corporation, the address of its registered office within Rhode Island is		red office within Rhode Island is
450	0 VETERANS MEMORIAL PARKWAY, SUITE 7	A, EAST PROVIDENCE RI 02914
	If a business corporation, the business in which it is engaged The company provides post-acute care physician services to residents in assisted living facilities, nursing homes, and long-term acute care facilities.	
7. A pp	olicant is otherwise authorized to do business in	the state of Rhode Island.
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Data:	T. L. M. ODILL	Vohra Wound Physicians of FL, LLC
Date	July 7, 2014	Name of Applicant Corporation, Limited Liability Company or Limited Partnership
	FILED	BySignature of Authorized Officer of the Corporation
	JUL 0 9 2014 BY ON 228139 1:56	By Noda
	BY On 228/39	Signature of Authorized Person for the Limited Liability Company or
	1:56	By
		Signature of Authorized Person for the Limited Partnership

Form No. 624 Revised: 12/05



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

