

Filing and License Fee: \$230.00 minimum



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

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SECRETARY OF STATE
CORPORATIONS DIV
2015 MAR 33 PM 2:41

PROFESSIONAL SERVICE CORPORATION

ARTICLES OF INCORPORATION

The undersigned acting as incorporator(s) of a professional service corporation under Chapters 7-5.1 and 7-1.2 of the General Laws of Rhode Island, 1956, as amended, adopt(s) the following Articles of Incorporation for such corporation:

1. The name of the corporation is Maureen Maroon Chung M.D. Ph.D. Inc.
(This is a close corporation pursuant to § 7-1.2-1701 of the General Laws, 1956, as amended.) (Strike if inapplicable.)

2. The profession to be practiced through the professional service corporation is Medicine

3. The total number of shares which the corporation has authority to issue is:

(a) If only one class: Total number of shares 1000

or

(b) If more than one class: Total number of shares of each class

A statement of all or any of the designations and the powers, preferences, and rights, including voting rights, and the qualifications, limitations, or restrictions of them, which are permitted by the provisions of Chapter 7-1.2 of the General Laws, 1956, as amended, in respect of any class or classes of shares of the corporation and the fixing of which by the articles of association is desired, and an express grant of the authority as it may then be desired to grant to the board of directors to fix by vote or votes any of them that may be desired but which is not fixed by the articles:

4. The address of the initial registered office of the corporation is:

282 County Road, Suite #3

(Street Address, not P.O. Box)

Barrington

(City/Town)

, RI 02806

(Zip Code)

and the name of its initial registered agent at

such address is Giovanni D. Ciclone, Esq.

(Name of Agent)

5. The corporation shall have perpetual existence until dissolved or terminated in accordance with Chapter 7-1.2.

6. Unless otherwise stated all authorized shares are deemed to have a nominal or par value of \$0.01 per share.

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By 243696 KM

7. Additional provisions, if any, not inconsistent with Chapter 7-1.2 which the incorporators elect to have set forth in these Articles of Incorporation:

8. The name and address of each incorporator is:

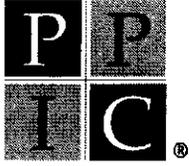
<u>Name</u>	<u>Address</u>
Giovanni D Cicione, Esq.	282 County Road, Suite #3, Barrington RI 02806
_____	_____
_____	_____
_____	_____

9. These Articles of Incorporation shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing Upon Filing

Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 3/3/2015

Signature of each Incorporator



*The link between
coverage and caring®*

P.O. Box 540658
Omaha, Nebraska 68154-0658
800-441-7742

November 7, 2014

Insured: Maureen A. Chung, MD

In response to your request, Preferred Professional Insurance Company (PPIC) uses this standard form to provide this information.

Here are the coverages and claims history as pertains to the above-referenced insured:

Policy #	Effective	Expiration	Retro	Medical Specialty	Incident	Aggregate
	07/01/2012	10/01/2012	07/01/2012	Surgery/General	\$1,000,000	\$3,000,000
	10/01/2012	10/01/2013	07/01/2012	Surgery/General	\$1,000,000	\$3,000,000
	10/01/2013	10/01/2014	07/01/2012	Surgery/General	\$1,000,000	\$3,000,000
	10/01/2014	10/01/2015	07/01/2012	Surgery/General	\$1,000,000	\$3,000,000

Claim #	DOL	Closed	Indemnity	State	Phase
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No Claims

Requestor warrants the insured has consented to release this information and will hold PPIC harmless from improper dissemination. PPIC does not assume any liability for loss that may occur from requestor's reliance on this information.

Insurance Operations Division
Preferred Professional Insurance Company



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, 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 handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

