Filing Fee: \$50.00

ID Number: 1007674



## 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:

owing statement for authority to transact busin  The legal name of the applicant business cor		
Orthopedics Rhode Island, Inc.	reportation, assured liability company of illifated parasetship is	·
The fictitious business name to be used is _	Ortho CT	
The state or territory under the laws of which	n it is incorporated, organized or formed is Rhode Island	
The date of incorporation, organization or for	rmation is 11/17/2014	<u> </u>
	•	- S
Nixon Peabody LLP, One Citizens Plaza, S	Ste. 500, Providence, RI 02903	نخ
if a business corporation, the business in whi	nich it is engaged medical services	5 A
		S ON
Applicant is otherwise authorized to do busin-	ness in the state of Rhode Island.	- io: 56 - 56
vala luc	herein is true and correct.	nation contained
e: 10/1/1/3		
	Name of Applicant Compression, Limited Liability, Company or 1	imited Dastaceable
	Name of Applicant Corporation, Limited Liability Company or to	1/2
	MADP (Cal)	1/2
FILED	By Signature of Authorized Officer of the Corporation or	1/2
	By Signature of Authorized Officer of the Corporation	<u> </u>
FILED  OCT 15 2015	By Signature of Authorized Officer of the Corporation or	1/2
	By Signature of Authorized Officer of the Corporation  or  By Signature of Authorized Person for the Limited Lia  or  By	bility Company
	Orthopedics Rhode Island, Inc.  The fictitious business name to be used is  The state or territory under the laws of which  The date of incorporation, organization or fo  If a business corporation, the address of its  Nixon Peabody LLP, One Citizens Plaza,  If a business corporation, the business in which	The fictitious business name to be used is Ortho CT  The state or territory under the laws of which it is incorporated, organized or formed is Rhode Island  The date of incorporation, organization or formation is 11/17/2014  If a business corporation, the address of its registered office within Rhode Island is Nixon Peabody LLP, One Citizens Plaza, Ste. 500, Providence, RI 02903  If a business corporation, the business in which it is engaged medical services  Applicant is otherwise authorized to do business in the state of Rhode Island.  Under penalty of perjury, I declare that the information is true and correct.

Form No. 524 Revised: 12/05 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

