



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Professional Corporation  
Fictitious Business Name Statement**

(Section 7-1.2-402 of the General Laws of Rhode Island, 1956, as amended)

**SECTION I**

The legal name of the applicant business corporation is: RI Integrated Medicine, Inc.

**SECTION II**

The fictitious business name to be used is: Rhode Island Integrated Medicine, Inc.

**SECTION III**

The state or territory under the laws of which it is incorporated is  
State: RI Country: USA

**SECTION IV**

The date of incorporation is 05/22/2003

**SECTION V**

The address of its registered office within Rhode Island is:

No. and Street: 931 JEFFERSON BOULEVARD, SUITE 2004

City or Town: WARWICK

State: RI Zip: 02886

Name: JONATHAN V. KALANDER, ESQ.

**SECTION VI**

The business in which it is engaged

SERVICES PROVIDED BY PHYSICIANS, DENTISTS, REGISTERED NURSES, PODIATRISTS,  
OPTOMETRISTS, PHYSICIAN ASSISANTS AND CHIROPRACTIC PHYSICIANS

**SECTION VII**

Applicant is otherwise authorized to do business in the state of Rhode Island.

**Signed this 10 Day of May, 2016 at 1:27:15 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

RI Integrated Medicine, Inc.  
Name of Applicant Corporation

VICTOR PEDRO  
Signature of Authorized Officer

Form No. 624  
Revised 09/07

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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*

