



**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: Chariho Family Chiropractic, Inc.

SECTION II

The fictitious business name to be used is: Vibrant Life Chiropractic

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 04/22/2009

SECTION V

The address of its registered office within Rhode Island is:

No. and Street: 54D RICHMOND TOWNHOUSE ROAD

City or Town: WYOMING

State: RI Zip: 02898

Name: NICOLE WHEELER-GLOVER

SECTION VI

The business in which it is engaged
CHIROPRACTIC PRACTICE

SECTION VII

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

Signed this 13 Day of July, 2016 at 4:49:11 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.*

Chariho Family Chiropractic, Inc.

Name of Applicant Corporation

NICOLE WHEELER-GLOVER

Signature of Authorized Officer

Form No. 624
Revised 09/07

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