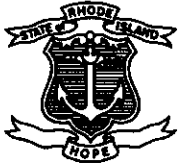


Filing Fee: \$20.00

ID Number 26630



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

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

**NON-PROFIT CORPORATION**

**FICTITIOUS BUSINESS NAME STATEMENT**

Pursuant to the provisions of Section 7-6-11 of the General Laws of Rhode Island, 1956, as amended, the undersigned non-profit corporation hereby submits the following statement for authority to transact its affairs in the State of Rhode Island under a fictitious business name:

1. The name of the non-profit corporation is Hope Hospice & Palliative Care Rhode Island
2. The fictitious business name to be used is Hope Hospice Rhode Island
3. The state or other jurisdiction under the laws of which it is incorporated is Rhode Island
4. The date of incorporation is March 26, 1976

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 10-7-16

Hope Hospice & Palliative Care Rhode Island

Print Name of Applicant Non-Profit Corporation

By

Signature of Authorized Person

President & CEO

Title

**FILED** 1:54

OCT 07 2016

By ll 285472

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