



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

Fee: \$20.00

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

**Domestic Non-Profit Corporation
Statement of Abandonment of Use of Fictitious Business Name**

(Section 7-6-11 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the non-profit corporation is: UNITED CEREBRAL PALSY OF RHODE ISLAND, INC.

SECTION II

The fictitious business name being abandoned is:

Life Without Limits Home Health Care

The date when the original fictitious business name statement was filed is

SECTION III

The state or other jurisdiction under the laws of which it is incorporated is
State: RI Country:

SECTION IV

The date of incorporation is 07/07/1954

Signed this 11 Day of June, 2019 at 11:45:38 AM. *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 § 7-6.*

UNITED CEREBRAL PALSY OF RHODE ISLAND, INC.

Name of Applicant Non-Profit Corporation

KARL P PROVOST

Signature of Authorized Person

Form No. 627

Revised 09/07



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:

June 11, 2019 11:43 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

