

Filing Fee: \$50.00

ID Number: 151542



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State  
Corporations Division  
100 North Main Street  
Providence, Rhode Island 02903-1335

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:

- 1. The legal name of the applicant business corporation, limited liability company or limited partnership is: SHC Services Inc
- 2. The fictitious business name to be used is Supplemental Health Care Services
- 3. The state or territory under the laws of which it is incorporated, organized or formed is Delaware
- 4. The date of incorporation, organization or formation is 5/20/02
- 5. If a business corporation, the address of its registered office within Rhode Island is 10 Weybosset Street, Providence RI 02903
- 6. If a business corporation, the business in which it is engaged Health Care Staffing
- 7. Applicant is otherwise authorized to do business in the state of Rhode Island.

DEC 22 12 PM 1:58

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

Date: 12/2/05

SHC Services Inc  
Name of Applicant Corporation, Limited Liability Company or Limited Partnership

X By Stephen The  
Signature of Authorized Officer of the Corporation

or

By \_\_\_\_\_  
Signature of Authorized Person for the Limited Liability Company

or

By \_\_\_\_\_  
Signature of Authorized Person for the Limited Partnership

FILED

DEC 22 2005

By AMF  
88813