

Filing Fee: \$20.00

ID Number 29044



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

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

**NON-PROFIT CORPORATION**

**FICTITIOUS BUSINESS NAME STATEMENT**  
(To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-6-11 of the General Laws, 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 VNS HomeCare, Inc.
2. The fictitious business name to be used is VNS Home Health Services
3. The state or other jurisdiction under the laws of which it is incorporated is Rhode Island
4. The date of incorporation is 5/24/67

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

Date: \_\_\_\_\_

VNS HomeCare, Inc.  
Print Name of Applicant Non-Profit Corporation  
By *George B. H.*  
Signature of Authorized Person  
President  
Title

SEP 29 2 33 PM '99  
RECEIVED  
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CORPORATIONS DIV.

**FILED**  
SEP 29 1999  
BY *JBH*  
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