Filing Fee: \$50.00

ID Number:



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

08 896 15

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:

| ١. | The legal name of the applicant business corporation, limited liability company or limited partnership is: Prevent, Inc. |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. | The fictitious business name to be used is Get A Lift |
| 3. | The state or territory under the laws of which it is incorporated, organized or formed is North Carolina |
| 4. | The date of incorporation, organization or formation is |
| 5. | If a business corporation, the address of its registered office within Rhode Island is 222 Jefferson Blvd., Suite 200, Warwick RI 02888 |
| 5 . | If a business corporation, the business in which it is engaged facilities |
| 7. | Applicant is otherwise authorized to do business in the state of Rhode Island. Under penalty of perjury, I declare that the information contained herein is true and correct. |
| Da | te: |
| | Signature of Authorized Officer of the Colporation By Signature of Authorized Person for the Limited Liability Company or |

Signature of Authorized Person for the Limited Partnership

Form No. 624 Revised: 07/05