



State of Rhode Island and Providence Plantations
Department of State - Business Services Division
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

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R.I. DEPT. OF STATE
BUS. SVCS. DIV.
2020 FEB - 3 PM 12:13

Articles of Incorporation
Business Corporation
Filing Fee: \$230.00 minimum

The undersigned acting as Incorporator(s) of the corporation under RIGL 7-1.2, adopt(s) the following Articles of Incorporation for such corporation:

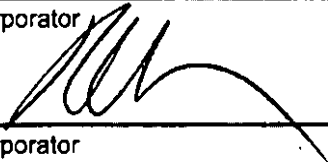
1. The name of the corporation is:		
WellCare Health Plans of Rhode Island, Inc.		
Is this a close corporation pursuant to <u>RIGL 7-1.2-1701</u> of the General Laws, 1956, as amended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
2. The total number of shares which the corporation has the authority to issue is: (<u>RIGL 7-1.2-605</u>) (Unless otherwise stated all authorized shares are deemed to have a nominal or par value of \$0.01 per share.)		
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share
1,000	Common Stock	\$1.00
If you desire, you may include a statement of all or any of the designations and the power, preferences, and rights, including voting rights, and the qualifications, limitations, or restrictions of them which are permitted by the provisions of <u>RIGL 7-1.2</u> . State any provisions here (optional): Check this box to indicate an attachment. <input type="checkbox"/>		
3. The name and address of the initial registered agent/office of the corporation is:		
Agent Name C T Corporation System		
Street Address (<u>NOT</u> a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A,		
City/Town East Providence,	State RHODE ISLAND	Zip Code 02914
4. The corporation has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with <u>RIGL 7-1.2</u> .		

FILED

FEB 03 2020

STAMP

BY R. G46yH 12:13

5. Additional provisions, if any, not inconsistent with RIGL 7-1.2 which the incorporators elect to have set forth in these Articles of Incorporation:			
Check this box to indicate an attachment. <input checked="" type="checkbox"/>			
6. The name and address of each Incorporator is: (RIGL 7-1.2-201)			
Name		Address	
Michael Haber		8735 Henderson Road	
City/Town	State	Zip Code	
Tampa	FL	33634	
Name		Address	
City/Town	State	Zip Code	
Name		Address	
City/Town	State	Zip Code	
7. Date when these Articles of Incorporation will be effective: CHECK ONLY ONE BOX			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the day of filing) _____			
<i>Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.</i>			
Signature of Incorporator		Date	
			
Signature of Incorporator		Date	
Signature of Incorporator		Date	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

Attachment to the Articles of Incorporation of

WellCare Health Plans of Rhode Island, Inc.

Section 5 additional provisions:

a. Bylaws: The Shareholders shall have the exclusive power to alter, amend, repeal or adopt new Bylaws.

b: Indemnification: The Corporation shall indemnify officers, directors, employees and agents to the fullest extent applicable by law or statute, as the same may be amended and supplemented.

c: Limitation of liability of directors: The personal liability of directors in any action brought by the shareholders or the Corporation for monetary damages against any director of the Corporation for any action taken, or any failure to take any action, as a director is eliminated pursuant to RIGL 7-1.2-202(b)(3).