

Filing Fee: \$20.00

ID Number 31868



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 **United Cerebral Palsy of Rhode Island, Inc.**
2. The fictitious business name to be used is **UCP Rhode Island.**
3. The state or other jurisdiction under the laws of which it is incorporated is **Rhode Island.**
4. The date of incorporation is **July 7, 1954.**

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

Date: June 5, 2002

United Cerebral Palsy of Rhode Island, Inc.

Print Name of Applicant Non-Profit Corporation

By *Sam R. Conry*
Signature of Authorized Person

President

Title

FILED

JUN 10 2002
By Att # 63
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