

Filing Fee: \$50.00

ID Number: 114791



**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**  
(To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-1.1-7.1; 7-16-9 or 7-13-2 of the General Laws, 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:  
NNA OF RHODE ISLAND, INC.
2. The fictitious business name to be used is NNA OF PROVIDENCE
3. The state or territory under the laws of which it is incorporated, organized or formed is RHODE ISLAND
4. The date of incorporation, organization or formation is OCTOBER 6, 2000
5. If a business corporation, the address of its registered office within Rhode Island is  
222 JEFFERSON BLVD, SUITE 200, WARWICK, RI 02888
6. If a business corporation, the business in which it is engaged  
OWNS AND OPERATES KIDNEY DIALYSIS 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.

Date: JANUARY 15, 2002

NNA OF RHODE ISLAND, INC

Name of Applicant Corporation, Limited Liability Company or Limited Partnership

By M. Stephen J. Korman, EXEC V.P.  
Signature of Officer for the Corporation Title

or

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

or

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

**FILED**

**JAN 22 2002**

By [Signature]  
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**JAN 22 12 56 PM '02**

Form No. 624  
Revised 01/99

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SECRETARY OF STATE  
CORPORATIONS DIVISION  
JAN 22 2002