

Filing Fee: \$50.00

ID Number: 95396



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

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SECRETARY OF STATE
CORPORATIONS DIV
SEP 22 1 20 PM '04

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: Home Care Advantage CHC, Inc.
2. The fictitious business name to be used is HomeCare Advantage CHC *or*
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 June 9 1997
5. If a business corporation, the address of its registered office within Rhode Island is David H. Ferrara, 21 Garden City Drive, Cranston, RI 02920
6. If a business corporation, the business in which it is engaged Home Health Care Services
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: September 20, 2004

Home Care Advantage CHC, Inc.

Name of Applicant Corporation, Limited Liability Company or Limited Partnership

FILED

SEP 22 2004

By KMC

m 45574

By Charles M. Riley *CEO/President*
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