Filing Fee: $10.00

FICTITIOUS BUSINESS NAME STATEMENT
OF

R.I. Chapter, Myasthenia Gravis Foundation, Inc
(Correct Name of Corporation)

To the Secretary of State
of the State of Rhode Island

Pursuant to the provisions of Section 7-1.1-7.1 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following statement for authority to transact business in the State of Rhode Island under a fictitious name:

FIRST: Fictitious Business name to be used Rhode Island Chapter Myasthenia Gravis Foundation, Inc

SECOND: Name of applicant corporation ~~Rhode Island Chapter~~ R.I. Chapter, Myasthenia Gravis Foundation, Inc

THIRD: Incorporated under the laws of New York, N.Y.

FOURTH: Date of incorporation Nov 12, 1952

FIFTH: Business in which engaged Non-Profit Organization in the Care, Treatment and Research in Myasthenia Gravis

SIXTH: Address of registered office within Rhode Island 210 Regency West, 2 Jackson Walkway Providence, RI 02903

SEVENTH: Applicant is otherwise qualified to do business in the State of Rhode Island.

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Dated Aug. 1, 1980
(This statement shall expire five (5) years from date of filing)

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R.I. Chapter, Myasthenia Gravis Foundation, Inc
(Applicant)
BY Irving D Paster
Its Chairman

FORM 32 2M 7-78

AUG 20 1980