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State of Rhode Island Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Professional Corporation Fictitious Business Name Statement

(Section 7-1.2-402 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The legal name of the applicant business corporation is: <u>MedOp Behavioral Health Associates of Rhode Island, P.C.</u>

SECTION II

The fictitious business name to be used is: LifeStance Health

SECTION III

The state or territory under the laws of which it is incorporated is State: <u>RI</u> Country: <u>USA</u>

SECTION IV

The date of incorporation is $\frac{10/16/2006}{10}$

SECTION V

The address of its registered office within Rhode Island is:

No. and Street: 222 JEFFERSON BLVD. SUITE 200

City or Town: WARWICK

Name: <u>INCORP SERVICES, INC.</u>

SECTION VI

State: RI

Zip: <u>02888</u>

The business in which it is engaged BEHAVIORAL HEALTH SERVICES

SECTION VII

Applicant is otherwise authorized to do business in the state of Rhode Island.

Signed this 29 Day of June, 2021 at 6:21:39 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

MedOp Behavioral Health Associates of Rhode Island, P.C.

Na	ame of Applicant Corporation	
	YAN PARDO gnature of Authorized Officer	
	m No. 624 vised 09/07	
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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

June 29, 2021 06:18 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

