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## Statement of Abandonment of Use of Fictitious Business Name

DOMESTIC and FOREIGN Non-Profit Corporation

→ Filing Fee: \$20.00

R.I. DEPT. OF STATE BUS SVCS DIV

2021 AUG 20 A 9 46

Pursuant to the provisions of RIGL <u>7-6-11</u>, the undersigned non-profit corporation hereby abandons the use of a fictitious business name in the transaction of its affairs in the state of Rhode Island and submits the following:

Rhode Island and Submits	the following.				
Entity ID Number:	2. The name of the corpor	2. The name of the corporation is:			
000029890	Gateway Healthcare, Inc.				
3. The fictitious business	name to be abandoned is:				
LifeWatch EAP					
4. The date when the original statement being abandon	inal fictitious business name led was filed is:	06-18-	-2013		
5. The state or country the entity is incorporated is:		6.	6. The date of incorporation is:		
Rhode Island			02-11-1965		
Under penalty of perjury,	I declare that the information c	ontained	t herein is true and correct.		
Name of Applicant Non-P	rofit Corporation				
Gateway Healthcare, Inc					
Title of Authorized Person			Date		
Secretary			8/5/2021		
Signature of Authorized F	Person				
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MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov AUG 20 2021 AUG 20 2021 Q: 44