



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

**Non-Profit Corporation**  
**Application for Certificate of Authority**  
(Section 7-6-74 of the General Laws of Rhode Island, 1956, as amended)

**SECTION I**

1. The name of the corporation is Community Health Network of Connecticut, Inc.

1(a). The name, if different, which it elects to use in Rhode Island is:

*Note: If 1(a) is completed, a "Fictitious Business Name Statement" is required to be filed with this application*

**SECTION II**

It is incorporated under the laws of State: CT Country: USA

**SECTION III**

The date of its incorporation is 10/25/1994

and the period of its duration is  Perpetual  Date certain for dissolution

**SECTION IV**

The address of its principal place of business is:

No. and Street: 11 FAIRFIELD BOULEVARD

City or Town: WALLINGFORD

State: CT Zip: 06492 Country: USA

**SECTION V**

The address of its proposed registered office in Rhode Island is:

No. and Street: 222 JEFFERSON BOULEVARD

SUITE 200

City or Town: WARWICK

State: RI Zip: 02888

Name: CORPORATION SERVICE COMPANY

**SECTION VI**

The specific purpose or purposes which it proposes to pursue in conducting its affairs in Rhode Island

are:

**PROMOTES AVAILABILITY OF HIGH QUALITY, COMPREHENSIVE COST EFFECTIVE HEALTH CARE SERVICES TO A CHARITABLE POPULATION.**

**SECTION VII**

The names and respective addresses of its directors and officers are:

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	SYLVIA B. KELLY	11 FAIRFIELD BOULEVARD WALLINGFORD, CT 06492 USA
TREASURER	CARL A. MIKOLOWSKY DDS	43 GRANITE COURT COLCHESTER, CT 06415 USA
SECRETARY	CARL A. MIKOLOWSKY DDS	43 GRANITE COURT COLCHESTER, CT 06415 USA
CEO	SYLVIA B. KELLY	11 FAIRFIELD BOULEVARD WALLINGFORD, CT 06492 USA
VICE CHAIR	SYLVIA B. KELLY	11 FAIRFIELD BOULEVARD WALLINGFORD, CT 06492 USA
CHAIR	SUZANNE LAGARDE	374 GRAND AVENUE NEW HAVEN, CT 06513 USA
DIRECTOR	SYLVIA B. KELLY	11 FAIRFIELD BOULEVARD WALLINGFORD, CT 06492 USA
DIRECTOR	SUZANNE LAGARDE	374 GRAND AVENUE NEW HAVEN, CT 06513 USA
DIRECTOR	CARL A. MIKOLOWSKY DDS	43 GRANITE COURT COLCHESTER, CT 06415 USA
DIRECTOR	RONALD E. COURSEY II	36 QUEENS COURT RAYNHAM, MA 02767 USA
DIRECTOR	JOHN H. SENECHAL MD	TOLLAND COUNTY PEDIATRICS, 239 MERROW ROAD TOLLAND, CT 06084 USA
DIRECTOR	TARSHA CALLOWAY	53 CHATHAM STREET, 2ND FLOOR NEW HAVEN, CT 06513 USA

**Signed this 7 Day of June, 2023 at 4:28:42 PM by the officers(s).** *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 § 7-6.*

**SYLVIA B. KELLY**

Signature of President or Vice President

CARL A. MIKOLOWSKY, DDS

Signature of Secretary of Assistant Secretary

Form No. 250  
Revised 09/07

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# Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: June 06, 2023

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of incorporation for the below domestic Non-Stock corporation was filed in this office.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far, as indicated by the records of this office, such corporation is in existence.

## Business Details

Business Name	COMMUNITY HEALTH NETWORK OF CONNECTICUT, INC.
Business ALEI	US-CT.BER:0303407
Formation Date	10/25/1994



Secretary of the State

Business ALEI: US-CT.BER:0303407  
Note: To verify this certificate, visit [Business.ct.gov](https://Business.ct.gov)

Certificate Number: C-00096406



State of Rhode Island  
**Department of State | Office of the Secretary of State**  
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, 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 07, 2023 04:26 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

