



**State of Rhode Island
Office of the Secretary of State**

Fee: \$10.00

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

**Non-Profit Corporation
Articles of Dissolution**

(Section 7-6-54 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the corporation is HOPEHEALTH VISITING NURSE

ARTICLE II

A resolution to dissolve the corporation was adopted in the following manner:

(check one box only)

☒ The resolution to dissolve the corporation was adopted at a meeting of members held on 12/6/2023, at which meeting a quorum was present, and the resolution received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.

☐ The resolution to dissolve the corporation was adopted by a consent in writing on , signed by all members entitled to vote with respect thereto.

☐ The resolution to dissolve the corporation was adopted at a meeting of the board of directors held on , and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.

ARTICLE III

All debts, obligations, and liabilities of the corporation have been paid and discharged, or adequate provision has been made therefore.

ARTICLE IV

The plan of distribution, if any, adopted by the corporation is as follows:

[Insert Plan of Distribution]
(if no plan of distribution was adopted, so state.)

IN ACCORDANCE WITH ARTICLE 5(C)(1) OF THE ARTICLES OF INCORPORATION OF HOPEHEALTH VISITING NURSE ("HHVN"), AS AMENDED, UPON DISSOLUTION, THE NET ASSETS OF HHVN SHALL BE DISTRIBUTED TO HHVN'S SOLE MEMBER, HOPEHEALTH, FORMERLY KNOWN AS HOME CARE & HOSPICE OF NEW ENGLAND.

ARTICLE V

All of the remaining property and assets of the corporation have been transferred, conveyed or distributed in accordance with the provisions of Chapter 7-6.

ARTICLE VI

There are no suits pending against the corporation in any court in respect of which adequate provision has not been made for the satisfaction of any judgement, order or decree, which may be entered against it.

Signed this 7 Day of December, 2023 at 12:50:55 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 § 7-6.*

HOPEHEALTH VISITING NURSE

Corporate Name

By DIANA FRANCHITTO

☒ President or ☐ Vice President (check one)

AND

By CARIE BAILEY

☒ Secretary or ☐ Assistant Secretary (check one)

Form No. 203
Revised 09/07

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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:

December 07, 2023 12:49 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Gregg M. Amore
Secretary of State

