



State of Rhode Island
Department of State - Business Services Division

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Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee \$50.00

Pursuant to the provisions of RIGL 7-1.2-402, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1. Entity ID Number 000150274	2. The name of the Corporation is: MEDICAL TRANSPORTATION MANAGEMENT, INC.	
3. The fictitious business name to be used is: MTM Health		
4. The corporation is organized under the laws of: MO	5. The date of incorporation is: 08/29/2005	
6. The address of its registered office within Rhode Island is: Street Address 875 Centerville Rd, Bldg 4 Unit 11 Warwick, RI 02886 City State RHODE ISLAND Zip		
7. The business in which it is engaged: Non-Emergency Medical Transportation Broker		
8. Applicant is otherwise authorized to do business in the state of Rhode Island.		
9. Under penalty of perjury, I declare and affirm that I have examined this Fictitious Business Name Statement and that the information contained herein is true and correct.		
Name of Authorized Officer of the Corporation Lisa DuBois		Date 02/12/2025
Signature of Authorized Officer of the Corporation 		

MAIL TO:

Division of Business Services
148 W River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.