



State of Rhode Island
Department of State - Business Services Division

REC'D RID05 BSD
25 APR 10 PM 1:16:30

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:

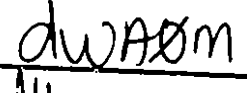
1. Entity ID Number: 001727446	2. The name of the Corporation is: Medical Air Services Association, Inc.	
3. The fictitious business name to be used is: Masa		
4. The corporation is organized under the laws of: Oklahoma	5. The date of incorporation is: 05/14/1974	
6. The address of its registered office within Rhode Island is: Street Address 450 VETERANS MEMORIAL PKWY, STE 7A		
City EAST PROVIDENCE	State RHODE ISLAND	Zip 02914
7. The business in which it is engaged: Prepaid Emergency Assistance.		
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 KARA KOROSEC, ATTORNEY-IN-FACT		Date 04/02/2025
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.