

Certificate of Assumed Name
Pursuant to General Business Law, §130

NYS Department of State
Division of Corporations, State Records and UCC
41 State Street, Albany, NY 12231-0001
www.dos.state.ny.us

1. NAME OF ENTITY

ALEXANDER INFUSION, LLC

0295920

2. BUSINESS FORMED UNDER (CHECK ONE):

☒ Business Corporation Law

☐ Limited Liability Company Law

☐ Education Law

☐ Not-for-Profit Corporation Law

☐ Insurance Law

☐ Revised Limited Partnership Act

☐ Other (specify law): _____

3. ASSUMED NAME

AVANTI HEALTH CARE SERVICES

4. PRINCIPAL PLACE OF BUSINESS IN NEW YORK STATE (MUST BE NUMBER AND STREET, IF NONE, INSERT OUT-OF-STATE ADDRESS)

130-17 23rd Avenue
College Point, N.Y. 11356

5. COUNTIES IN WHICH BUSINESS WILL BE CONDUCTED UNDER ASSUMED NAME

☒ ALL COUNTIES (if not, circle county[ies] below)

Albany	Clinton	Genesee	Monroe	Orleans	Saratoga	Tompkins
Allegany	Columbia	Greene	Montgomery	Oswego	Schenectady	Ulster
Bronx	Cortland	Hamilton	Nassau	Otsego	Schoharie	Warren
Broome	Delaware	Herkimer	New York	Putnam	Schuyler	Washington
Cattaraugus	Dutchess	Jefferson	Niagara	<u>Queens</u>	Seneca	Wayne
Cayuga	Erie	Kings	Oneida	Rensselaer	Steuben	Westchester
Chautauqua	Essex	Lewis	Onondaga	Richmond	Suffolk	Wyoming
Chemung	Franklin	Livingston	Ontario	Rockland	Sullivan	Yates
Chenango	Fulton	Madison	Orange	St. Lawrence	Tioga	

6. NUMBER AND STREET ADDRESS(ES) AND COUNTY OF EACH BUSINESS LOCATION WITHIN NEW YORK STATE (USE CONTINUOUS SHEET, IF NEEDED)

☒ No New York State Business Location

130-17 23rd Avenue
College Point, N.Y. 11356
Queens County

INSTRUCTIONS FOR SIGNATURE: If corporation, by an officer; if limited partnership, by a general partner; if limited liability company, by a member or manager or by an attorney-in-fact or authorized person for such corporation, limited partnership, or limited liability company.

Kathleen Kelly, Member
Name and Title


Signature

DOS-1338(7/99)

N. Y. S. DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

ALBANY, NY 12231-0001

FILING RECEIPT

ENTITY NAME : ALEXANDER INFUSION, LLC

DOCUMENT TYPE : ASSUMED NAME LTD LIABILITY CO

SERVICE COMPANY : UNITED CORPORATE SERVICES, INC.

CODE: 37

FILED: 11/22/2000

CASH#: 953660

FILM#: C295920-3

PRINCIPAL LOCATION

130-17 23RD AVENUE

COLLEGE POINT
NY 11356

COMMENT:

ASSUMED NAME

AVANTI HEALTH CARE SERVICES

FILER

SWEENEY LEV & BLINKOFF LLP
38 THIRD AVENUE

NEW YORK

NY 10017-4101*

* FEES : 35.00 PAYMENTS: 35.00
* FILING : 25.00 CASH :
* COUNTY : .00 CHECK : 35.00
* COPIES : 10.00
* MISC :
* HANDLE : .00

REFUND:

DO3HD104

DOS-281 (8/98)