RI SOS Filing Number: 201747545380 Date: 7/21/2017 12:45:00 PM

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## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

## FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

| 1.    | The legal name of the applicant business corporation International Cruise & Excursion Gallery, Inc.            | ion, limited liability company or limited partnership is:   | _           |
|-------|--|---|-------------|
| 2.    | The fictitious business name to be used is Sears Tr  | Travel  | _           |
| 3.    | The state or territory under the laws of which it is inc   | ncorporated, organized or formed is Delaware  | _           |
| 4.    | The date of incorporation, organization or formation   | n is 11/17/2000   | _           |
| 5.    | If a business corporation, the address of its register<br>450 Veterans Memorial Parkway, Suite 7A East Provide | لقس مسسب  | <u>-</u>    |
| 6.    | If a business corporation, the business in which it is   |   | <del></del> |
| 7.    | Applicant is otherwise authorized to do business in  | the state of Rhode Island.  |             |
|       |  | Under penalty of perjury, I declare that the information containe herein is true and correct.                                   | d           |
| Dat   | e: 7/13/17   | International Cruise & Excursion Gallery, Inc.  Name of Applicant Corporation, Limited Liability Company or Limited Partnership | <u> </u>    |
|       | 12:45 pm   | By Signature of Authorized Officer of the Corporation Christine Aguilera  |             |
| FILED |  |   |             |
|       | JUL <b>2 1</b> 2017  | By Signature of Authorized Person for the Limited Liability Company   |             |
|       | BY 308726  | BySignature of Authorized Person for the Limited Partnership  | _           |

Form No. 624 Revised: 12/05 RI SOS Filing Number: 201747545380 Date: 7/21/2017 12:45:00 PM



I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

July 21, 2017 12:45 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

