

Filing Fee: \$50.00

ID Number: 000668224



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

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

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIVISION  
2017 DEC 28 1:43

**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:

- The legal name of the applicant business corporation, limited liability company or limited partnership is International Cruise & Excursion Gallery, Inc.
- The fictitious business name to be used is InnSeason Concierge Club
- The state or territory under the laws of which it is incorporated, organized or formed is Delaware
- The date of incorporation, organization or formation is 11/17/2000
- If a business corporation, the address of its registered office within Rhode Island is 450 Veterans Memorial Parkway, Suite 7A East Providence, Rhode Island 02914
- If a business corporation, the business in which it is engaged Seller of Travel
- Applicant is otherwise authorized to do business in the state of Rhode Island.

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 11/27/17

International Cruise & Excursion Gallery, Inc.  
Name of Applicant Corporation, Limited Liability Company or Limited Partnership

By   
Signature of Authorized Officer of the Corporation  
Christine Aguilera

By \_\_\_\_\_  
Signature of Authorized Person for the Limited Liability Company

By \_\_\_\_\_  
Signature of Authorized Person for the Limited Partnership

**FILED**  
**DEC 28 2017**  
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State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

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:

December 28, 2017 02:43 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

