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R.I. DEPT. OF STATE BUS OVES DIV



State of Rhode Island and Providence Plantations **Department of State - Business Services Division** 2020 FEB 10 P 1: 18

Fictitious Business Name Statement

STABLE

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

the following statement for autl	tIGL <u>7-1.2-402,</u> the undersigned hority to transact business in the		
1. Entity ID Number	2. Exact Name of the Corporation Management	Resource Pai	tners, Inc.
3. The fictitious business named Citywide	Security, I	nc.	
4. The corporation is organized under the laws of:		5. The date of incorporation is. 4/8/2011	
6. The address of its registere	ed office within Rhode Island is:		
Street Address 155 South	th Main St	treet Suite	: 301
Providence		State RHODE ISLAND	^{Zip} 02903
7. The business in which it is Securit	engaged: y services.		
8. Applicant is otherwise author	orized to do business in the state	e of Rhode Island.	
	leclare and affirm that I have e led herein is true and correct.	examined this Fictitious Bus	iness Name Statement and
Name of Authorized Officer of	the Corporation A. Corrigar	1	2/10/2020
Signature of Authorized Office		NE <u>v t Hrisk</u>	
	0000		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED |

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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:

February 10, 2020 01:18 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

