RI SOS Filing Number: 202450377930 Date: 4/8/2024 1:41:00 PM



## **Fictitious Business Name Statement**

**DOMESTIC** or FOREIGN Business Corporation

→ Filing Fee: \$50.00

MAREC'D RIDOS BSD

the following statement for	of RIGL <u>7-1,2-402</u> , the undersign authority to transact business in	gned business corporation hereby in the state of Rhode Island under	submits a
1. Entity ID Number: 2. The name of the Corporation is:			· · · · · · · · · · · · · · · · · · ·
001668419	Gallagher Affinity Insurance Services, Inc.		
3. The fictitious business	name to be used is:		
BEYOGI			
4. The corporation is organized under the laws of:		5. The date of incorporation is:	
Illinois		08/11/2016	
6. The address of its regi	stered office within Rhode Islan	d is:	
Street Address 450 Veteran	s Memorial Parkway, Suite 7A	<del></del>	
City East Providence		State RHODE ISLAND	Zip 02914
7. The business in which Insurance Agency, Marketi			
	authorized to do business in th		
Under penalty of perjury, information contained he	I declare and affirm that I have	examined this Fictitious Business	Name Statement and that the
Name of Authorized Officer of the Corporation			Date
Gallagher Affinity Insurance	ce Services, Inc.		03/12/2024
Signature of Authorized	Officer of the Corporation		
			FILED

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov APR 8 2024 T1 4 P

BY mnn QA

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.

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
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:

April 08, 2024 01:41 PM

Gregg M. Amore

Tregs M. Coure



