RI SOS Filing Number: 202451463650 Date: 4/17/2024 12:59:00 PM



State of Rhode Island

## **Department of State - Business Services Division**

## **Fictitious Business Name Statement**

**DOMESTIC or FOREIGN Business Corporation** 

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-1,2-402</u>, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

ctitious business name:	<u> </u>			
1, Entity ID Number:	2. The name of the Corporation is:			
001668419	Gallagher Affinity Insurance	Gallagher Affinity Insurance Services, Inc.		
3. The fictitious business	name to be used is:			
MASSAGE MAGAZINE				
4. The corporation is organized under the laws of:		5. The date of incorporation is:		
Illinois		08/11/2016		
6. The address of its regis	stered office within Rhode Islan	d is:		
Street Address 450 Veteran	s Memorial Parkway, Suite 7A			
City East Providence		State RHODE ISLAND	Zip 02914	
7. The business in which	it is engaged:			
Insurance Agency, Marketin	ng and Brokerage			
*	authorized to do business in the			
Under penalty of perjury, information contained he		examined this Fictitious Business N	Name Statement and that the	
Name of Authorized Officer of the Corporation		<del></del>	Date	
Gallagher Affinity Insuranc	e Services, Inc.		04/11/2024	
Signature of Authorized (	Officer of the Corporation			
Kaia Korosec	KARA KOROSEC, SECRETARY			
			1000	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MY FILED /257

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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 17, 2024 12:59 PM

Gregg M. Amore

Secretary of State

Treg M. Coure

