Filing Fee: \$50.00

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RI016 - 12/16/2005 C T System Online

## 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

| am | resuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1955, as ended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the owing statement for authority to transact business in the state of Rhode Island under a fictitious business name: |  |  |  |
|----|--|--|--|--|
| 1. | IES Residential, Inc.  |  |  |  |
| 2. | The fictitious business name to be used is Hourston Stafford Electric  |  |  |  |
| 3. | The state or territory under the laws of which it is incorporated, organized or formed is  |  |  |  |
| 4. | The date of incorporation, organization or formation is  |  |  |  |
| 5. | If a business corporation, the address of its registered office within Rhode Island is  out-of-state (10203 Mula Circle, Stafford, TX 77477) 3   |  |  |  |
| 6. | If a business corporation, the business in which it is engaged Electrical Wiring Installa hour   |  |  |  |
| 7. | 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.   |  |  |  |
| Da | te: 10/9/2007 IES Residential, Inc   |  |  |  |
|    | Name of Applicant Corporation, Limited Libbility Company or Limited Partnership  By  Signature of Authorized Officer of the Corporation  |  |  |  |
|    | <u>or</u>  |  |  |  |
|    | By Signature of Authorized Person for the Limited Liability Company  |  |  |  |
|    | FILED //i23 By   |  |  |  |
|    | OCT 25 2007 Signature of Authorized Person for the Limited Partnership   |  |  |  |
|    | m No. 624  |  |  |  |