Filing Fee: \$50.00

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Form No. 624 Revised: 12/05

## 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

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

foll	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.	The legal name of the applicant business corporation, limited liability company or limited partnership is:
2.	The fictitious business name to be used is Rown'es Towns
3.	The state or territory under the laws of which it is incorporated, organized or formed is $RI$
4.	The date of incorporation, organization or formation is
5.	If a business corporation, the address of its registered office within Rhode Island is  20 Pike ST Wakefield RL
6.	If a business corporation, the business in which it is engaged Towny & Auto Transport
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	Re: 3-6-08  Rame of Applicant Corporation, Limited Liability Company or Limited Partnership Company of Limited Partnership C
NECFIVE	By Signature of Authorized Person for the Limited Liability Company  MAR 0 6 2008  By AMF  Signature of Authorized Person for the Limited Partnership  Signature of Authorized Person for the Limited Partnership



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, 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:

A. RALPH MOLLIS

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Secretary of State

