Filing Fee: \$50.00

	-
ID Numbe	r:



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

ollowing statement for authority to tra	ansact business in the state of Rhode Island under a fictitious	ship hereby submits the s business name:
	ousiness corporation, limited liability company or limited partr െ	iership is:
2. The fictitious business name to b	e used is <u>Compan-MySoft</u> Com	pany
3. The state or territory under the la	ws of which it is incorporated, organized or formed is	elaware
The date of incorporation, organi.	zation or formation is <u>January</u> 34, 19	<i>178</i>
5. If a business corporation, the add	lress of its registered office within Rhode Island is	2
6. If a business corporation, the bus	iness in which it is engaged <u>SOF-Wave</u> <u>de</u>	ve lopment
. Applicant is otherwise authorized	to do business in the state of Rhode Island.	
	Under penalty of perjury, I declare that the herein is true and correct.	ne information contained
Date: 7/3/08	Compeo, Inc.	
	Name of Applicant Corporation, Limited Liability Co	mine the state of
in	By Signature of Authorized Officer of the Co	mmer
FILED	Signature of Authorized Officer of the Co	rporation
JUL 2 1 2008	Ву	
JUL 2 1 2008  By 063806	By Signature of Authorized Person for the Li	imited Liability Company

Form No. 624 Revised: 12/05