



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

**Business Corporation
Fictitious Business Name Statement**

(Section 7-1.2-402 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The legal name of the applicant business corporation is: Poole Properties, Inc.

SECTION II

The fictitious business name to be used is: LRP Designs

SECTION III

The state or territory under the laws of which it is incorporated is
State: RI Country: USA

SECTION IV

The date of incorporation is 06/12/2008

SECTION V

The address of its registered office within Rhode Island is:

No. and Street: 2348 POST ROAD

City or Town: WARWICK

State: RI

Zip: 02886

Name: WILLIAM F. PAQUIN, ESQ.

SECTION VI

The business in which it is engaged
REAL ESTATE COMPANY

SECTION VII

Applicant is otherwise authorized to do business in the state of Rhode Island.

Signed this 2 Day of April, 2009 at 10:02:13 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

Poole Properties, Inc.
Name of Applicant Corporation

LISA L. ROBERTUS POOLE
Signature of Authorized Officer

Form No. 624
Revised 09/07

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State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

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

Secretary of State

