Filing Fee: \$50.00 ID Number: _____



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 amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

	The legal name of the applicant business corporation				
2.	The fictitious business name to be used is SailTime Rhode Island				
	The state or territory under the laws of which it is incorporated, organized or formed is Rhode Island				
4.	The date of incorporation, organization or formation	is _	July 24, 2009		
	If a business corporation, the address of its registered office within Rhode Island is				000 000 000
	P.O. Box 777, Barrington, RI 02806		All Association of the Control of th	<u></u>	
6. If a business corporation, the business in which it is engaged					NS SECTION S
7.	Applicant is otherwise authorized to do business in the state of Rhode Island.				3 0V
		Under penalty of perjury, I declare that the information contained herein is true and correct.			
n -	te: 7/04/09	Name of Applicant Corporation, Limited Liability Company or Limited Partnership			
Da	le:				
		Ву	Signature of Authorized Officer of the Corporation		_
			or 1 a a		
		Ву	Signature of Authorized Person for the Limited Liability (Compan	у
			<u>or</u>		
	FILED	Ву	Signature of Authorized Person for the Limited Partners	hip	

Form No. 624 Revised: 12/05 JUL 24 2009 By 195285