Filing Fee: \$50.00 ID Number: 505179



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 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:

1.	The legal name of the applicant business corporation	n, limited liability company or limited partnership is:
2.	The fictitious business name to be used is $Q$	
3.	The state or territory under the laws of which it is inc	corporated, organized or formed is Rhado Islan
4.	The date of incorporation, organization or formation	is
5.	If a business corporation, the address of its registere	ed office within Rhode Island is 10 polahon has
6.	If a business corporation, the business in which it is	engaged thipping & moing Conjuny
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: 8-10-09	Name of Applicant Corporation, Limited Liability Company or Limited Partnership
	FILED	By Signature of Authorized Officer of the Corporation
	AUG 1 9 2009 By 094959	BySignature of Authorized Person for the Limited Liability Company
	9:13	<u>or</u>
	EI : E MA E I DUA 8005	By