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

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## 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

	nended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the lowing statement for authority to transact business in the state of Rhode Island under a fictitious business name:	
1.	1. The legal name of the applicant business corporation, limited liability company or limited partnership is:	
2.	The fictitious business name to be used isAPLUS AUTO RONTAL	
3.	The state or territory under the laws of which it is incorporated, organized or formed is Rhade Holand	
4.	The date of incorporation, organization or formation is FRIVARY 2010	
5.	If a business corporation, the address of its registered office within Rhode Island is 399 Popper 50443	
	If a business corporation, the business in which it is engaged <u>AUTO</u> RenTKL	
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	Name of Applicant Corporation, Limited Liability Company or Limited Partnership	
	By	
	FILED  By  Signature of Authorized Person for the Limited Liability Company	
	APR 02 2010 or	
	BY 1/5343 9:32 By 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

A. Japa 1. eeio

Secretary of State

