Filing Fee: \$50.00

ID Number: 539043



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.

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 Cullen Enterprises, LLC	on, limited liability company or limited partnership is:
2.	The fictitious business name to be used is The Si	hore Adventure Center, LLC
3.	The state or territory under the laws of which it is in	corporated, organized or formed is Rhode Island
4.	The date of incorporation, organization or formation	1 is 5/5/2010
5.	If a business corporation, the address of its registered office within Rhode Island is	
6.	If a business corporation, the business in which it is engaged	
7. Applicant is otherwise authorized to do business in the state of Rhode Island.		
	G/04/2040	Under penalty of perjury, I declare that the information contained herein is true and correct.
Date	e: 6/01/2010	Cullen Enterprises, LLC
	(0.5) FILED	By Signature of Authorized Diffeer of the Corporation By Signature of Authorized Person for the Limited Liability Company or Signature of Authorized Person for the Limited Liability Company Signature of Authorized Person for the Limited Partnership
	No. 624 sed: 12/05	