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## 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, limited liability company or limited partnership is:  TLC Pet Services LLC |   |             |  |
|----|--|---|-------------|--|
| 2. | The fictitious business name to be used is K-9 Club House  |   |             |  |
| 3. | . The state or territory under the laws of which it is incorporated, organized or formed is RI                                   |   |             |  |
| 4. | The date of incorporation, organization or formation is 6/13/12  |   |             |  |
| 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. | 7. Applicant is otherwise authorized to do business in the state of Rhode Island.  |   |             |  |
|    | Under penalty o<br>herein is true an   | f perjury, I declare that the information discorrect. | )           |  |
| Da | Date: 6/27/2 TLC Pet Service   |   | (3)         |  |
|    | Name of Applicant C  | Corporation, Limited Liability Company or Lind<br>Co  | <del></del> |  |
|    | By<br>Signature of   | BySignature of Authorized Officer of the Corporation  |             |  |
|    | By Signature of  | or<br>Authorized Parson for the Limited Liabil        | ity Company |  |
|    | JUN 29 2012  | <u>or</u>   |             |  |
|    | $\Omega$ $\Box$ Signature of   | Authorized Person for the Limited Partr               | iership     |  |

Form No. 624 Revised: 12/05



## 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

