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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:

	, and the same and
1.	The legal name of the applicant business corporation, limited liability company or limited partnership is: LANA DREW CUSTOM CONCIERG LLC
2.	The fictitious business name to be used is LANA DREW STUDENT CONCIERGE SERVICE
3.	The state or territory under the laws of which it is incorporated, organized or formed is
4.	The date of incorporation, organization or formation is
5.	If a business corporation, the address of its registered office within Rhode Island is HT BRISTOL RIPERSON RELIEF BRISTOL BRIST
6.	If a business corporation, the business in which it is engaged Professional Conduction That Jenus
7.	Applicant is otherwise authorized to do business in the state of Rhode Island.
Dat	Under penalty of perjury, I declare that the information contained herein is true and correct. Name of Applicant Corporation, Limited Liability Company or Limited Partnership
	FILED APR 2 2 2013 By Signature of Authorized Office of the Corporation By Signature of Authorized Person for the Limited Liability Company Signature of Authorized Person for the Limited Partnership

Form No. 624 Revised: 12/05