

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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SECRETARY OF STATE
CORPORATIONS DIV
2014 APR 28 AM 11:45

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: BTI, Inc.
2. The fictitious business name to be used is BTI, Inc. of Alpharetta, GA
3. The state or territory under the laws of which it is incorporated, organized or formed is Georgia
4. The date of incorporation, organization or formation is 10/09/2013
5. If a business corporation, the address of its registered office within Rhode Island is 450 Veterans Memorial Pkwy., Suite 7A East Providence, RI 02917
6. If a business corporation, the business in which it is engaged Retail merchandising and installation services.
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.

Date: 4/24/2014

BTI, Inc.

Name of Applicant Corporation, Limited Liability Company or Limited Partnership

By [Signature]

Signature of Authorized Officer of the Corporation

or

By _____

Signature of Authorized Person for the Limited Liability Company

or

By _____

Signature of Authorized Person for the Limited Partnership

FILED

APR 28 2014

By 203118

A-A-11:45 A.M.