



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Corporation
Fictitious Business Name Statement**

(Section 7-1.2-402 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The legal name of the applicant business corporation is: Virtual DBS, Inc.

SECTION II

The fictitious business name to be used is: Targeted Ad Display

SECTION III

The state or territory under the laws of which it is incorporated is
State: DE Country: USA

SECTION IV

The date of incorporation is 04/28/2010

SECTION V

The address of its registered office within Rhode Island is:

No. and Street: 27 SAKONNET POINT ROAD

City or Town: LITTLE COMPTON

State: RI Zip: 02837

Name: JAMES P. REDDING, ESQ.

SECTION VI

The business in which it is engaged
SOFTWARE DEVELOPMENT

SECTION VII

Applicant is otherwise authorized to do business in the state of Rhode Island.

Signed this 10 Day of April, 2015 at 4:09:07 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

Virtual DBS, Inc.

Name of Applicant Corporation

JAMES P. REDDING

Signature of Authorized Officer

Form No. 624
Revised 09/07

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State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, 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:

Nellie M. Gorbea
Secretary of State

