Filing Fee: \$50.00

ID Number: 90534



## 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:		
2.	The fictitious business name to be used is	Better Stream	
3.	The state or territory under the laws of which it is in	ncorporated, organized or formed is $-\mathcal{R}h_0$	ode Island
4.	The date of incorporation, organization or formation	n is 2-28-2014	
5.	If a business corporation, the address of its registe		2015 JUL
6.	If a business corporation, the business in which it is	s engaged	<u>ω</u> \$5,5;?
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.	
Dat	te: 7 31 2015	Jusmines Gifts	LLC
		Name of Applicant Corporation, Limited Liability Con	7
	FILED	Signature of Authorized Officer of the Cor	poration
	IUL 3 1 2015	<u> </u>	
	BY On 253966 4:20	By Signature of Authorized Person for the Limited Liability Company  or	
	4.20	BySignature of Authorized Person for the Lin	mited Partnership

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

Tullin U. Horler

