



**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: CBIZ Benefits & Insurance Services, Inc.

SECTION II

The fictitious business name to be used is: CBIZ Retirement Plan Services

SECTION III

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

SECTION IV

The date of incorporation is 06/18/2012

SECTION V

The address of its registered office within Rhode Island is:

No. and Street: 450 VETERANS MEMORIAL PARKWAY, SUITE 7A

City or Town: EAST PROVIDENCE

State: RI Zip: 02914

Name: CT CORPORATION SYSTEM

SECTION VI

The business in which it is engaged
BENEFITS AND INSURANCE SERVICES

SECTION VII

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

Signed this 13 Day of November, 2015 at 9:20:33 AM. *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.*

CBIZ Benefits & Insurance Services, Inc.

Name of Applicant Corporation

MICHAEL W GLEESPEN
Signature of Authorized Officer

Form No. 624
Revised 09/07

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