

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:

1. The legal name of the applicant business corporation, limited liability company or limited partnership is:  
Bernstein, Shur, Sawyer & Nelson, P.A., Inc.
2. The fictitious business name to be used is Bernstein, Shur, Sawyer & Nelson, P.A.
3. The state or territory under the laws of which it is incorporated, organized or formed is Maine
4. The date of incorporation, organization or formation is October 28, 1981
5. If a business corporation, the address of its registered office within Rhode Island is \_\_\_\_\_  
450 Veterans Memorial Parkway, Suite 7A, East Providence, RI 02914
6. If a business corporation, the business in which it is engaged Law firm
7. Applicant is otherwise authorized to do business in the state of Rhode Island.

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV  
2016 JAN -6 AM 11:11

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 1/4/2016

11:11 Am  
**FILED**

JAN 06 2016  
By 264687  
KM

Bernstein, Shur, Sawyer & Nelson, P.A., Inc.

Name of Applicant Corporation, Limited Liability Company or Limited Partnership

By [Signature]

Signature of Authorized Officer of the Corporation  
John L. Carpenter, Treasurer

or

By \_\_\_\_\_

Signature of Authorized Person for the Limited Liability Company

or

By \_\_\_\_\_

Signature of Authorized Person for the Limited Partnership



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*

