Filing Fee: \$50.00

ID Number: 00/66/5/9



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

SECRETARY OF STA

## 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 Islams 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:

1011	lowing statement for authority to transact business in	in the state of tyliode island under a nothlods business hame.
1.	The legal name of the applicant business corporation Hawkeye Manageme	tion, limited liability company or limited partnership is:
2.		
3.	The state or territory under the laws of which it is in	incorporated, organized or formed is Rhode Island
4.	The date of incorporation, organization or formation	on is $3/25/2016$
5.	If a business corporation, the address of its registe	
6.		is engaged <u>Creperie</u> /Restaurant)
	Applicant is otherwise authorized to do business in	
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Dat	te: 4/29/16	Hawkeye Management LLC
	Otail	Name of Applicant Corporation, Limited Liability Company or Limited Partnership
	વ:aન FILED	Signature of Authorized Officer of the Corporation
	MAY 0 4 2016	By Signature of Authorized Person for the Limited Liability Company
	BY 90273508	<u>or</u>
	ľ	By

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

