



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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2016 DEC 22 PM 1:18

Fictitious Business Name Statement

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-6-11 the undersigned non-profit corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1. Entity ID Number	2. Exact Name of the Corporation RHODE ISLAND & MASSACHUSETTS SWIMMING
3. The fictitious business name to be used is: RIMA SWIM LEAGUE	
4. The corporation is organized under the laws of: RHODE ISLAND	5. The date of incorporation is: 12/22/16
Under penalty of perjury, I declare and affirm that I have examined this Fictitious Business Name Statement and that the information contained herein is true and correct.	
Name of Applicant Non-Profit Corporation DOUG IMMEL	
Title of Authorized Person TREASURER	Date 12/22/16
Signature of Authorized Person Doug Immel SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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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

