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 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2017 APR 19 PM 12: 26

**Fictitious Business Name Statement**  
 DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-1.2-402, the undersigned business 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 <b>1671647</b>		2. Exact Name of the Corporation <b>Citron Hygiene US Corp.</b>	
3. List the fictitious business name to be used: <b>Workplace Essentials</b>			
4. List the state or country the entity is incorporated: <b>Delaware</b>		5. List the date of incorporation: <b>2/14/2017</b>	
6. List the address of its registered office within Rhode Island: Street Address <b>450 Veterans Memorial Parkway, Suite 7A</b>			
City <b>East Providence</b>		State <b>RHODE ISLAND</b>	Zip <b>02914</b>
7. List the business in which it is engaged: <b>restroom hygiene services</b>			
8. Applicant is otherwise authorized to do business in the state of Rhode Island.			
<i>Under penalty of perjury, I declare and affirm that I have examined this Fictitious Business Name State and that the information contained herein is true and correct.</i>			
Name of Authorized Officer of the Corporation <b>Felix-Etienne Lebel, President</b>			Date <b>4/19/17</b>
Signature of Authorized Officer of the Corporation <i>Felix E Lebel</i> 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

**FILED** 12:26 pm

**APR 19 2017**

**BY** 301268

KM

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.