

Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

repeat to the provisions of RIGL 7-16-9 the undersigned limited liability company hereby

	It for authority to transact busine		nd under
1. Entity ID Number	2. Exact Name of the Limited L		
3. The fictitious business name to be used is:			
Wise G	uys Deli	Sulthfie	eld
4. The state or country the entity is formed is: 5. The date of formation is:			
Rhode J	Island	05/09	7/2017
6. Applicant is otherwise authorized to do business in the state of Rhode Island.			
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.			
Name of Applicant Limited Lia	bility Company		Date /
Botan	LLC		05/09/2017
Signature of Authorized Person			

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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