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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-1.2-402</u>, 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 2. Exact Name of the Corporation		
555411 - PROFESIS INC		
3. List the fictitious business name to be used:		
ARMENI WINE INC		
List the state or country the entity is incorporated:	5. List the date of incorporatio	n:
RI		
6. List the address of its registered office within Rhode Island:		
Street Address 31 CAPITOL VIEW AVR		
No. Providence	State RHODE ISLAND	02911
7. List the business in which it is engaged:		
WINE IMPORT		
8. 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 Authorized Officer of the Corporation		Date
MANAGING DIRECTOR		06.09.2017
Signature of Authorized Officer of the Corporation		
S 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

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BY CM 305697

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.

FORM 624 Corporation - Revised: 06/2016

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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:

June 09, 2017 02:54 PM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

