

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

R.I. DEPT. OF STATE BUS SVCS DIV 2017 AUG 15 AM 10: 50

Pursuant to the provisions of RIGL <u>7-16-9</u> the undersigned limited liability company hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

Entity ID Number	2. Exact Name of the Limite	ed Liability Company		
001676035	RIVO	Enterprises) LLC	
3. The fictitious business nam	ne to be used is:			
Chi	umley's M	stural ke	tchup	
4. The state or country the entity is formed is:		5. The date of formation is:	5. The date of formation is:	
Rhode I	5/And	Ang.	2, 2017	
6. Applicant is otherwise authorized to do business in the state of Rhode Island.				
Under penalty of perjury, I on the information contained h		e examined this Fictitious Bus	siness Name State and that	
Name of Applicant Limited Lia	ability Company		Date	
RIVU E	Ente-prises	LLC	8.10.17	
Signature of Authorized Perso	7 / SIEN / OC	CULTERY HERE-JA	Robert 1. Rigg. 401.439.1996	

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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