



State of Rhode Island and Providence Plantations


Department of State - Business Services Division

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2017 SEP 21 AM 10:59
**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	2. Exact Name of the Corporation <b>Little Learners Academy of Cranston, Inc.</b>	
3. List the fictitious business name to be used: <b>Little Learners Academy of Cranston</b>		
4. List the state or country the entity is incorporated: <b>Rhode Island</b>		5. List the date of incorporation: <b>09/21/2017</b>
6. List the address of its registered office within Rhode Island: Street Address <b>21 Garden City Drive</b>		
City <b>Cranston</b>	State <b>RHODE ISLAND</b>	Zip <b>02920</b>
7. List the business in which it is engaged: <b>Day care, child care and/or preschool or early childhood facility.</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>Robert D. Murray, Esq.</b>		Date <b>09/21/2017</b>
Signature of Authorized Officer of the Corporation  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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**SEP 21 2017**
 BY  313010

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



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:

September 21, 2017 10:59 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

