

Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

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:

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1. Entity ID Number	2. Exact Name of the Li	2. Exact Name of the Limited Liability Company		
000200935	Winfield Solutions, LLC	Winfield Solutions, LLC		
3. The fictitious business	name to be used is:			
Armor Seed			R.1.	
4. The state or country the entity is formed is.		5. The date of formation is:	RECEI) DEPT C	
Delaware		8/20/2007	NED PI	
6. Applicant is otherwise	authorized to do business in	the state of Rhode Island.	2 NA	
Under penalty of perjui	y, I declare and affirm that ned herein is true and corre	I have examined this Fictitious Buect.	siness Name State and that	
Name of Applicant Limited Liability Company			Date	
Winfield Solutions, LLC			10/18/2017	
Signature of Authorized I	Person	and the second second		
Margretta A. Hanson	- ARU	Contraction of the		

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 0CT 20 2017

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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 LLC - Revised: 06/2016