

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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(4) (4)	• •

1. Entity ID Number	2. Exact Name of the Limited Liability Company			
001657057	Bellevue Capital Partners, LLC			
The fictitious business name to be used is:				
Bellevue Ventures				
4. The state or country the entity is formed is:		5. The date of formation is:		
Delaware		9/24/2015		
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 Liability Company			Date	
Bellevue Capital Partners, LLC		11/17/2017		
Signature of Authorized Person				
My 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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A: A: 12:32pm