

SECRETARY OF STATE SECRETARY OF SECR

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:

1. Entity ID Number	2. Exact Name of the Limited Liability Company	
	Fabian Enterprise, LLC	
3. The fictitious business name to be used is.		
Fabian's Cor	porate Cleaners	
4. The limited liability company is organized under the laws of:		5. The date of formation is:
Rhode Island.		March 15th, 2018
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 Statement and that the information contained herein is true and correct.		
Name of Applicant Limited Liability Company		Date
Araoj Butt-Aparicio		Feb 23, 2018
Signature of Authorized Person		
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MAIL TO:

Division of Business Services

148 W. River Street. Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 **Website:** www.sos.ri.gov

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