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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

CCRECTATIONS CIV

Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-1.2-402</u>, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a firstitious business name:

riculous business name:			<u> </u>	
1. Entity ID Number	2. Exact Name of the Corporation			
796533	Instyle 33 LLC			
3. List the fictitious business name to be used:				
Myrolfing ofe				
4. List the state or country the entity is incorporated:		5. List the date of incorporation:		
Phode Island		02-12-2013		
6. List the address of its registered office within Rhode Island:				
Street Address 265 Treehorn Street				
Ports month		State RHODE ISLAND	2ip 0287/	
7. List the business in which it is engaged:				
/ce cream/loffee Truck				
8. 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 Authorized Officer of the Corporation			Date	
Claudia B Trankenberger			03-14-18	
Signature of Authorized Officer of the Corporation				
Mandia Jan Lbertogsion DOCUMENT HERE				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Websits: www.sos.rl.gov

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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 Corporation - Revised: 06/2016