

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. The name of the Limited Liabili	lity Company is:				
1680342	ERPM LLC	٠ ب				
3. The fictitious business name to be used is:						
TOP CLIMBER TREE SERVICE						
4. The state or country the entity is formed is: 5. The date of formation is:						
RI		1/10/2018				
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 Lia	bility Company		Date			
ERPM	LLC		5/3/2018			
Signature of Authorized Person						
Eddie Davilla 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.n.gov