Filing Fee: \$50.00

ID Number: 001683807



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

## FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

£			311.000 1101	110.
-	Maxitranscers corporation	ration, limited liability company or limited partnersh	nip is:	-
2.	The fictitious business name to be used is Max	ki Money Services		
3.		s incorporated, organized or formed is Delaware	· 	
4.	The date of incorporation, organization or forma	tion is	2018	<u> </u>
5.	If a business corporation, the address of its regis	stered office within Rhode Island is	AUG -:	RETAR RETAR
	222 Jefferson Blvd Suite 200 Warwick, RI 02	888	ယ	<u> </u>
6.	If a business corporation, the business in which it is engaged Money Transmitter		AH	SS SE
	in a business corporation, the section		-:-	AIS
			ü	m
	7/24/2040	Under penalty of perjury, I declare that the information contained herein is true and correct.  Maxitransfers Corporation		
FILED  AUG 0 3 2018  KL 336253		Name of Applicant Corporation, Limited Lability Company or Limited Partnership		
		By Signature of Authorized Officer of the Corpo	_	
		Gerardo Gonzalez		
		<u>or</u> By		
		BySignature of Authorized Person for the Limit	ed Liability	Company
		<u>or</u>		
		By		