

State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

 \rightarrow 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				
	LOLY	MARKET	UC.		
3. The fictitious business name to be used is					
R.I. CONVENIENCE					
4. The limited liability company	y is organized under	the laws of:	_	5. The date of formation is	
A HODE	1SLAND			08/17/18	
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	ability Company	<u>.</u>		Date	
LOUAY	AAYEL			08/17/18	
Signature of Authorized Person					
SIGN DOD WENT HERE					
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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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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.



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island

and Providence Plantations, hereby certify that this document, duly executed in

accordance with the provisions of Title 7 of the General Laws of Rhode Island, as

amended, has been filed in this office on this day:

August 17, 2018 09:02 AM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

