




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

**Fictitious Business Name Statement**  
 DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

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

RECEIVED  
 SECRETARY OF STATE  
 2019 FEB 20 AM 11:30  
 CORPORATION DIVISION

1. Entity ID Number <b>000525671</b>		2. Exact Name of the Corporation <b>Intercontinental Capital Group, Inc.</b>	
3. List the fictitious business name to be used: <b>Veterans Community Home Loans</b>			
4. List the state or country the entity is incorporated: <b>New York</b>		5. List the date of incorporation: <b>February 10, 2005</b>	
6. List the address of its registered office within Rhode Island: Street Address <b>222 Jefferson Blvd.</b>			
City <b>Warwick</b>		State <b>RHODE ISLAND</b>	Zip <b>02888</b>
7. List the business in which it is engaged: <b>Mortgage lending</b>			
8. Applicant is otherwise authorized to do business in the state of Rhode Island. <i>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.</i>			
Name of Authorized Officer of the Corporation <b>Dustin DiMisa</b>			Date <b>2/14/19</b>
Signature of Authorized Officer of the Corporation  <div style="text-align: right;">SIGN DOCUMENT HERE</div>			

**MAIL TO:**

**Division of Business Services**  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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BY  **215**  
 11:30

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](mailto: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:

February 20, 2019 11:30 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

