RI-SOS Filing Number: 201987757860 Date: 2/27/2019 12:06:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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:

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2019 FEB 27 PH 12: 06

1. Entity ID Number	2. Exact Name of the Limited Liability Company Impact MHC Management,	
3. The fictitious business	name to be used is:	
Impact Communities		
4. The limited liability company is organized under the laws of:		5. The date of formation is:
Wyoming		5.25.2018
6. Applicant is otherwise	authorized to do business in the state of Rhode Islan	d.
	y, I declare and affirm that I have examined this F ntained herein is true and correct.	ictitious Business Name Statement and
Name of Applicant Limited Liability Company		Date
Impact MHC Management, LLC		2/14/2019
Signature of Authorized F	Person	
leta E Ce	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.ri.gov FEB 27 2019 12:06
BY ON HBPR3

RI SOS Filing Number: 201987757860 Date: 2/27/2019 12:06:00 PM



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 27, 2019 12:06 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

