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**Fictitious Business Name Statement**

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-16-9 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 <b>001032314</b>	2. Exact Name of the Limited Liability Company <b>ARD LLC</b>	
3. The fictitious business name to be used is: <b>Kevin Travers Design</b>		
4. The limited liability company is organized under the laws of: <b>Rhode Island</b>		5. The date of formation is: <b>3-26-2019</b>
6. Applicant is otherwise authorized to do business in the state of Rhode Island.		
<b>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.</b>		
Name of Applicant Limited Liability Company <b>Kevin Travers</b>		Date <b>3-26-2019</b>
Signature of Authorized Person 		

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

**FILED** ←  
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