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 au fictitious business name:	uthority to transact business if	n the state of Rhode Island under	a	
1. Entity ID Number	2. Exact Name of the Corporation			
001685113	Arch Underwriters Inc.			
3. The fictitious business na	me to be used is:			
AUI Insurance Services				
4. The corporation is organized under the laws of:		5. The date of incorporation	5. The date of incorporation is:	
Delaware		09/16/2015	09/16/2015	
6. The address of its registe	ered office within Rhode Island	d is:		
Street Address 450 Veterans Memorial Hwy, Suite 7A				
City East Providence		State RHODE ISLAND	Zip 02914	
7. The business in which it i	- -	ı	,	
Insurance producer that plans to sell, solicit, and negotiate insurance on behalf of insureds.				
8. Applicant is otherwise authorized to do business in the state of Rhode Island.				
Under penalty of perjury, that the information conta	I declare and affirm that I had almost and con	ave examined this Fictitious Burrect.	siness Name Statement and	
Name of Authorized Officer	···		Date	
Jennifer Kurz			4/10/2019	
Signature of Authorized Off	icer of the Corporation	CLIMENT HFRE		

MAIL TO:

Division of Business Services

148 W. River Street, Providence. Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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.