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CORPORATIONS  
 DIVISION

**Fictitious Business Name Statement**

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL ~~7-13-9~~ 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>716277</b>	2. The name of the Limited Liability Company is. <b>Experience Real Estate, LLC</b>
3. The fictitious business name to be used is: <b>Sunrise Rental Properties</b>	
4. The state or country the entity is formed is: <b>Rhode Island</b>	5. The date of formation is: <b>10/04/2011</b>
6. 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 Statement and that the information contained herein is true and correct</i>	
Name of Applicant Limited Liability Company <b>Kathleen Schmitt</b>	Date <b>5-13-19</b>
Signature of Authorized Person <b>Kathleen Schmitt</b>	

**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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**FILED**

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BY **JACK LOGG**