RI SOS Filing Number: 201994870640 Date: 5/31/2019 10:30:00 AM



State of Rhode Island and Providence Plantations

**Department of State - Business Services Division** 

SECRETARY OF STOCKED CORPORATIONS E

## **Fictitious Business Name Statement**

**DOMESTIC or FOREIGN Business Corporation** 

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-1.2-402</u>, 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:

Entity ID Number	12 Event Name of the Com		
r. Entity to Number	2. Exact Name of the Corporation		
515859	Betaspring, LLC		
3. List the fictitious business	name to be used:		
RevUp Capital			•
4. List the state or country the entity is incorporated:		5. List the date of incorporation:	
Rhode Island		10/19/2009	
6. List the address of its regis	stered office within Rhode Isl	land:	
Street Address 91 Clemence S	St		
City Providence		State RHODE ISLAND	Zip 02903
7. List the business in which	2 0		
Investment and Business C	onsulting Services		
8. Applicant is otherwise auth	norized to do business in the	state of Rhode Island.	·
Under penalty of perjury, I the information contained	declare and affirm that I ha herein is true and correct.	ve examined this Fictitious Bus	iness Name State and that
Name of Authorized Officer of	f the Corporation	<del></del>	Date
Allan K. Tear II			5-14-19
Signature of Authorized Offic		7	•
6	W XSINIO	CUMENT 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

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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:

May 31, 2019 10:30 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

