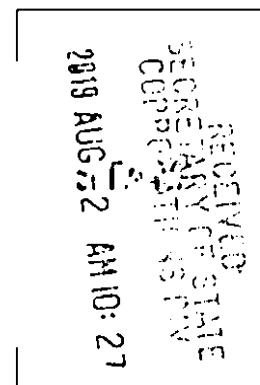




State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

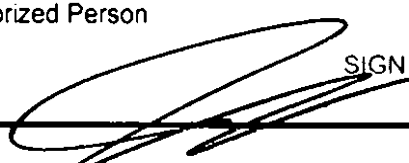


# Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 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:

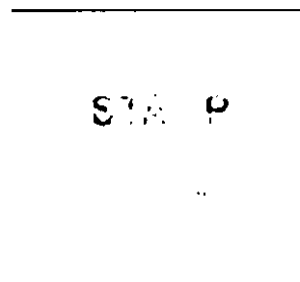
1. Entity ID Number  001697356	2. Exact Name of the Limited Liability Company  SHM Newport Shipyard, LLC
3. The fictitious business name to be used is:  Safe Harbor Newport Shipyard	
4. The limited liability company is organized under the laws of:  Delaware	5. The date of formation is:  6/12/19
6. Applicant is otherwise authorized to do business in the state of Rhode Island.	
<b><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></b>	
Name of Applicant Limited Liability Company  SHM Newport Shipyard, LLC	Date  8-1-19
Signature of Authorized Person   SIGN DOCUMENT HERE	

**FILED**

**AUG 02 2019**

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10:27

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

FORM 624B LLC - Revised 11/2017