ID Number: <u>159235</u> Filing Fee: \$50.00



Form No. 624

Revised: 12/05

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

| 2. The fictitious business name to be used | is FT of East Greenwich |
|--|---|
| 2. The fictitious business name to be used | |
| The state or territory under the laws of w | which it is incorporated, organized or formed is RI |
| 4. The date of incorporation, organization of | or formation is October 13, 2006 |
| 5. If a business corporation, the address of | f its registered office within Rhode Island is |
| 6. If a business corporation, the business i | in which it is engaged |
| 7. Applicant is otherwise authorized to do t | business in the state of Rhode Island. |
| | |
| | Under penalty of perjury. I declare that the information contained |
| | Under penalty of perjury, I declare that the information contained herein is true and correct. |
| Date: November 29, 2006 | Under penalty of perjury, I declare that the information contained herein is true and correct. FITNESS PROFESSIONALS, LLC |
| Date: November 29, 2006 | herein is true and correct. |
| FILED | herein is true and correct. FITNESS PROFESSIONALS, LLC Name of Applicant Corporation, Limited Liability Company or Limited Partnership |
| Date: November 29, 2006 FILED NOV 3 0 20 | herein is true and correct. FITNESS PROFESSIONALS, LLC Name of Applicant Corporation, Limited Liability Company or Limited Partnership |
| FILED | FITNESS PROFESSIONALS, LLC Name of Applicant Corporation, Limited Liability Company or Limited Partnership By Signature of Authorized Officer of the Corporation |
| FILED NOV 3 0 21 | FITNESS PROFESSIONALS, LLC Name of Applicant Corporation, Limited Liability Company or Limited Partnership By Signature of Authorized Officer of the Corporation |
| FILED | FITNESS PROFESSIONALS, LLC Name of Applicant Corporation, Limited Liability Company or Limited Partnership By Signature of Authorized Officer of the Corporation |
| FILED NOV 3 0 21 | FITNESS PROFESSIONALS, LLC Name of Applicant Corporation, Limited Liability Company or Limited Partnership By Signature of Authorized Officer of the Corporation or Signature of Authorized Person for the Limited Liability Company |

RECEIVED