

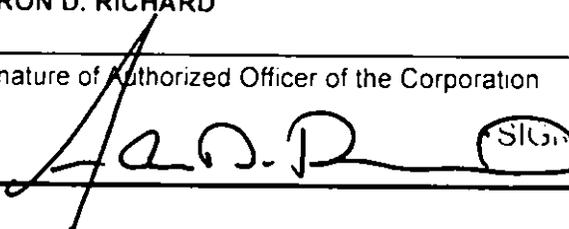


RECEIVED  
 R.I. DEPT. OF STATE  
 BUS. SVCS. DIV.  
 2019 SEP 24 AM 11:50

**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 authority to transact business in the state of Rhode Island under a fictitious business name

1. Entity ID Number <b>000155135</b>		2. Exact Name of the Corporation <b>THE PREMIUM GROUP INC.</b>	
3. List the fictitious business name to be used: <b>ARGUS RISK ADVISORS</b>			
4. List the state or country the entity is incorporated: <b>OHIO</b>		5. List the date of incorporation: <b>05/13/1991</b>	
6. List the address of its registered office within Rhode Island. Street Address <b>222 JEFFERSON BOULEVARD, SUITE 200</b>			
City <b>WARWICK</b>		State <b>RHODE ISLAND</b>	Zip <b>02888</b>
7. List the business in which it is engaged: <b>MEDICAL PROFESSIONAL LIABILITY INSURANCE AGENCY</b>			
8. 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 State and that the information contained herein is true and correct.</i>			
Name of Authorized Officer of the Corporation <b>AARON D. RICHARD</b>			Date <b>08/30/2019</b>
Signature of Authorized Officer of the Corporation  <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">SIG.</span> DOCUMENT 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

**FILED**  
**SEP 24 2019 11:50**  
 KL YDNWT

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.