

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

## FICTITIOUS BUSINESS NAME STATEMENT

(To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-1.1-7.1, 7-16-9 or 7-13-2 of the General Laws, 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:

transact business in the state of Rhode Island under a fictitious business name:	
1.	The legal name of the applicant business corporation, limited liability company or limited partnership is:  OCTOPI ENTERPRISES, LTD.
2.	The fictitious business name to be used is Damage Control
3.	The state or territory under the laws of which it is incorporated, organized or formed is
4.	The date of incorporation, organization or formation is 10 DEC 03
5.	If a business corporation, the address of its registered office within Rhode Island is  South Kingstown, RI 02874-1108
6.	If a business corporation, the business in which it is engaged Fire Safety & Code Consultants
7.	Applicant is otherwise authorized to do business in the state of Rhode Island.
	Under penalty of perjury, I declare that the information contained herein is true and correct.
Da	te: (2 9 07 Octopi Enterprises, Ltd.
	Name of Applicant Corporation, Limited Liability Company or Limited Partnership
	By Signature of Officer for the Corporation Title
	<u>or</u>
	By
	<u>or</u>
	Signature of Authorized Person for the Limited Partnership
	Signature of Authorized Person for the Limited Ratherens

Form No. 624 Revised: 01/99 DEC 0 9 2003

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