1D Number: 155844 Filing Fee: \$50.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

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

ame follo	Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of amended, the undersigned business corporation, limited liability company, or limited partricollowing statement for authority to transact business in the state of Rhode Island under a fictition.	ious business name: 0
١.	The legal name of the applicant business corporation, limited liability company or limited partnership is: Snelling Employment, LLC	
2.	The fictitious business name to be used is Snelling Professional Services	
3.	3. The state or territory under the laws of which it is incorporated, organized or formed is $\frac{\mathbf{D}_{i}}{\mathbf{D}_{i}}$	elaware
4.	The date of incorporation, organization or formation is 12/19/1996	
5.	i. If a business corporation, the address of its registered office within Rhode Island is 222 Jefferson Bivd., Suite 200, Warwick, RI 02888	
6.	If a business corporation, the business in which it is engaged Payroll and Billing Services	
7. Applicant is otherwise authorized to do business in the state of Rhode Island.		
Under penalty of perjury, I declare that the information herein is true and correct.		nat the information contained
ο.	Date: 10/30/06 Snelling Employment, LLC Name of Applicant Corporation, Limited Liabi	
Di	Name of Applicant Corporation, Limited Liabi	lity Company or Limited Partnership
	BySignature of Authorized Officer of to	the Corporation
	By Signature of Authorized Person for Barbara A. McAninch, I	the Limited Liability Company Manager
	By	r the Limited Partnership

Form No. 624 Revised: 12/05