

Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

STAMP

SETATION STATE

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 2. Exact Name of the Corporation Family's Choice Cremation, Inc. 1335715 3. The fictitious business name to be used is: A & G Lazer Services 5. The date of incorporation is: 4. The corporation is organized under the laws of: Rhode Island May 26, 2015 6. The address of its registered office within Rhode Island is: Street Address 1481 Wampanoag Trail City State Zip 02915 **East Providence** RHODE ISLAND 7. The business in which it is engaged: Crematory services 8. Applicant is otherwise authorized to do business in the state of Rhode Island. 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. Name of Authorized Officer of the Corporation Catherine A. Tattrie Signature of Authorized Officer of the Corporation

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov DEC 20 2019 STAMP

A. A. 10:30 PW