



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

DEPARTMENT OF STATE  
 CORPORATIONS DIV

2020 JAN -8 AM:9:41

**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>791569</b>		2. The name of the Corporation is: <b>Comercializadora La Feria de Las Fajas, Inc.</b>	
3. The fictitious business name to be used is: <b>Distri Vision</b>			
4. The corporation is organized under the laws of: <b>Rhode Island</b>		5. The date of incorporation is: <b>07/09/2012</b>	
6. The address of its registered office within Rhode Island is: <b>62 Newport Ave, R</b>			
Street Address <b>62 Newport Ave</b>			
City <b>Rumford</b>		State <b>RHODE ISLAND</b>	Zip <b>02916</b>
7. The business in which it is engaged: <b>Wholesale Distribution &amp; Retail Sales.</b>			
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 <b>Maria Luth Cuervo</b>			Date <b>01/08/2020</b>
Signature of Authorized Officer of the Corporation <i>Maria Luth Cuervo</i> SIGNATURE OF OFFICER			

**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**

**JAN 08 2020**

BY *Ch* **3847N**  
**9:41**

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.



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

January 08, 2020 09:41 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

