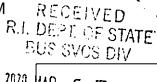
RI SOS Filing Number: 202035925820 Date: 3/5/2020 2:07:00 PM





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## **Fictitious Business Name Statement**

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

STAMP

Pursuant to the provisions of RIGL 7-16-9 the undersigned limited liability company hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

Entity ID Number	Exact Name of the Limited Liability Company	Exact Name of the Limited Liability Company	
	NORWICH INN & SPA AT P	ROVIDENCE, LLC	
3. The fictitious business	name to be used is:		
THE NORWICH SPA AT	GRADUATE PROVIDENCE		
4. The limited liability company is organized under the laws of:		5. The date of formation is	
Rhode Island		March 5,2020	
6. Applicant is otherwise	authorized to do business in the state of Rhode Island	d.	
	y, I declare and affirm that I have examined this Fi ntained herein is true and correct.	ictitious Business Name Statement and	
Name of Applicant Limited Liability Company		Date	
NORWICH INN & SPA AT PROVIDENCE, LLC		3-5-2020	
Signature of Atthorized F	Person SIGN 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 MAR 0 5 2020 STAMP

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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:

March 05, 2020 02:07 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

