State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Business Corporation
Fictitious Business Name Statement

(Section 7-1.2-402 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The legal name of the applicant business corporation is: B MCLANE INSURANCE AGENCY INC

SECTION II

The fictitious business name to be used is: McLane Insurance Agency

SECTION III

The state or territory under the laws of which it is incorporated is
State: RI Country: USA

SECTION IV

The date of incorporation is 11/10/2016

SECTION V

The address of its registered office within Rhode Island is:

No. and Street: 2914 POST ROAD, SUITE 6
City or Town: WARWICK State: RI Zip: 02886
Name: BRAD MCLANE

SECTION VI

The business in which it is engaged
NATIONWIDE INSURANCE AGENCY SPECIALIZING IN PROPERTY AND CASUALTY INSURANCE

SECTION VII

Applicant is otherwise authorized to do business in the state of Rhode Island.

Signed this 13 Day of May, 2020 at 10:09:21 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

B MCLANE INSURANCE AGENCY INC

Name of Applicant Corporation

BRAD MCLANE
Signature of Authorized Officer

Form No. 624
Revised 09/07