



State of Rhode Island

Department of State - Business Services Division

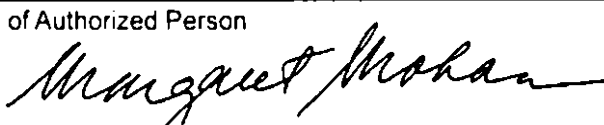
## Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

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:

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R.I. DEPT. OF STATE  
BUS SVCS DIV  
2020 OCT 23 P 1:04  
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1. Entity ID Number:  001694102	2. The name of the Limited Liability Company is:  True Storage Cranston, LLC
3. The fictitious business name to be used is:  CubeSmart 6953	
4. The state or country the entity is formed is:  Rhode Island	5. The date of formation is:  03-20-2019
6. Applicant is otherwise authorized to do business in the state of Rhode Island.	
<i>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.</i>	
Name of Applicant Limited Liability Company  True Storage Cranston, LLC	Date  10/22/2020
Signature of Authorized Person   Margaret Mohan	

### MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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BY 86787

A.A. 1:04 p.m.

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](mailto:corporations@sos.ri.gov).

FORM 624B LLC - Revised 08/2020