



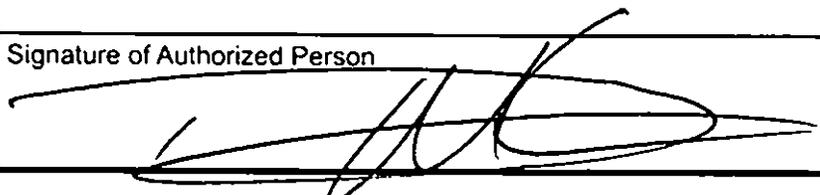
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 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2020 DEC -3 PM 12:00

**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:

|   |  |
|---|--|
| 1. Entity ID Number:<br><br>001715383   | 2. The name of the Limited Liability Company is:<br><br>Centurion Filing Services, LLC |
| 3. The fictitious business name to be used is:<br><br>RI Certificate Service  |  |
| 4. The state or country the entity is formed is:<br><br>Florida   | 5. The date of formation is:<br><br>April 18, 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<br><br>Centurion Filing Services, LLC   | Date<br><br>12/1/2020  |
| Signature of Authorized Person<br><br>  |  |

**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)

**FILED**  
 DEC 03 2020  
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