

Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

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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

ictitious business name:	ionly to transact business in the		
Entity ID Number	2. Exact Name of the Corporation		
001714356	Bow Hospitality LLC		
3. List the fictitious business name to be used:			
Hampton Inn and Suites			
List the state or country the entity is incorporated:		5. List the date of incorporation:	
Rhode Island		October 23, 2020	
6. List the address of its registered office within Rhode Island:			
Street Address 222 Jefferson Boulevard, Suite 200			
City Warwick		State RHODE ISLAND	Zip 02888——
7. List the business in which it is engaged:			
Hotel ownership			
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 State and that the information contained herein is true and correct.			
Name of Authorized Officer of the Corporation			Date
Sundip Kumar			1/21/2021
Signature of Authorized Officer of the Corporation 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 FILED

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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.

FORM 624 Corporation - Revised: 06/2016