

Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2021 JUN -3 A 10: 49

Pursuant to the provisions of RIGL <u>7-1.2-402</u>, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

Entity ID Number	2. Exact Name of the Corporation		
001690389	Natural Intelligence Technologies Inc.		
3. List the fictitious business name to be used:			
BestMoney			
List the state or country the entity is incorporated:		5. List the date of incorporation:	
Deleware		11-29-2018	
List the address of its registered office within Rhode Island.			
Street Address 450 Veterans Memorial Parkway, Suite 7A			
City East Providence		State RHODE ISLAND	Zip 02914
7. List the business in which it is engaged:			
Online Lead Generator			
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
Adi Orzel			06-01-2021
Sonature 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 10:49

FILED

JUN 3 2021

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