



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

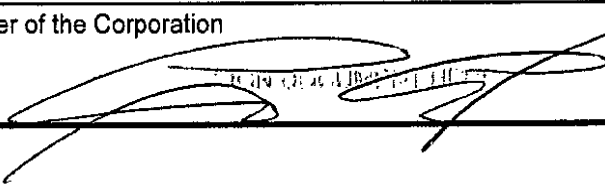
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R.I. DEPT. OF STATE
BUS SVCS DIV
2021 JUL -7 P 12:10

Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

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 fictitious business name:

1. Entity ID Number	2. Exact Name of the Corporation Leap Insurance, LLC	
3. The fictitious business name to be used is: Movement Insurance		
4. The corporation is organized under the laws of: Delaware		5. The date of incorporation is: 05/14/2010
6. The address of its registered office within Rhode Island is: Street Address 222 Jefferson Boulevard Suite 200		
City Warwick	State RHODE ISLAND	Zip 02888
7. The business in which it is engaged: Insurance		
8. 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 Authorized Officer of the Corporation Casey Crawford		Date 6/14/2021
Signature of Authorized Officer of the Corporation 		

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 ✓
JUL 07 2021
BY CM VEMJS
12:09

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.