



State of Rhode Island

Department of State - Business Services Division

Fictitious Business Name Statement

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$20.00

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Pursuant to the provisions of RIGL 7-6-11 the undersigned non-profit 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. The name of corporation: Full Gospel Business Men's Fellowship International		
3. The fictitious business name to be used is: Full Gospel Business Men's Fellowship International, Chapter 293			
4. The corporation is organized under the laws of: California		5. The date of incorporation is: January 2, 1953	
<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 Non-Profit Corporation Ronald Blain			
Title of Authorized Person Treasurer		Date 7/21/2021	
Signature of Authorized Person <i>Ronald Blain</i>			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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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 626 Non-Profit - Revised. 08/2020