



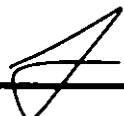
State of Rhode Island
Department of State - Business Services Division

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. The name of the Corporation is: ATM OPS INC		
3. The fictitious business name to be used is: BITSTOP			
4. The corporation is organized under the laws of: DELAWARE		5. The date of incorporation is: 02-09-2018	
6. The address of its registered office within Rhode Island is: Street Address 222 JEFFERSON BLVD., SUITE 200			
City WARWICK		State RHODE ISLAND	Zip 02888
7. The business in which it is engaged: MONEY TRANSMISSION SERVICES			
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 JESUS IZQUIERDO			Date 07/31/2021
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

SEP 07 2021

BY 
A.A. 2:32 p.m.

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 624A Corporation - Revised: 08/2020