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## **Department of State - Business Services Division**

## **Fictitious Business Name Statement** DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-16-9</u> the undersigned limited liability company hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

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Entity ID Number	2. Exact Name of the Limited Liability Company	-
	Carpenter Hall LLC	
3. The fictitious business	name to be used is:	
Zinnia Exeter		
4. The limited liability company is organized under the laws of:		5. The date of formation is:
Delaware		11/19/2021
6. Applicant is otherwise	authorized to do business in the state of Rhode Island	d.
Under penalty of perjuithat the information co	y, I declare and affirm that I have examined this Fintained herein is true and correct.	ictitious Business Name Statement and
Name of Applicant Limited Liability Company		Date
Carpenter Hall LLC		11/19/2021
Signature of Authorized for Docustigned by:  Jenny, Lee	Person SIGN DOCUMENT HERE	1

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri gov NOV 2 3 2021

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

November 23, 2021 01:13 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

