



Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

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1. Entity ID Number:	2. The name of the Corpo	2. The name of the Corporation is:		
001661382	METLIFE CONSUMER S	METLIFE CONSUMER SERVICES, INC.		
3. The fictitious business	name to be used is:			
Upwise				
4. The corporation is organized under the laws of:		5. The date of incorporation is:		
State of Delaware		03-15-2016		
6. The address of its reg	istered office within Rhode Islan	nd is:		
Street Address CT CORPO	PRATION SYSTEM, 450 VETER	ANS MEMORIAL PARKWAY, SUI	TE 7A	
City		I a	T	
EAST PROVIDENCE		State RHODE ISLAND	Zip 02914	
7. The business in which	it is engaged		02914	
EAST PROVIDENCE 7. The business in which OFFERING NON-INSURA	it is engaged	RHODE ISLAND TECTION PRODUCTS TO THE COI	02914	
EAST PROVIDENCE 7. The business in which OFFERING NON-INSURA 8. Applicant is otherwise	it is engaged: ANCE ASSISTANCE AND PROT authorized to do business in the	RHODE ISLAND TECTION PRODUCTS TO THE COI	02914 NSUMER	
7. The business in which OFFERING NON-INSURA 8. Applicant is otherwise Under penalty of perjury,	it is engaged: ANCE ASSISTANCE AND PROT authorized to do business in the I declare and affirm that I have rein is true and correct.	RHODE ISLAND TECTION PRODUCTS TO THE COI e state of Rhode Island.	02914 NSUMER	
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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 624A Corporation - Revised: 08/2020

MAIL TO:

Division of Business Services

Phone: (401) 222-3040 Website: www.sos.ri.gov

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