



State of Rhode Island and Providence Plantations

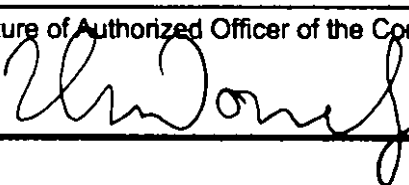
**Department of State - Business Services Division**
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 BUS SVCS DIV

2021 DEC 24 PM 3:04

**Fictitious Business Name Statement**DOMESTIC or FOREIGN Business Corporation **LLC**

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL ~~7-1.2-402~~ <sup>7-16</sup>, 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<br><b>001732947</b>                                                                                                                                       | 2. Exact Name of the Corporation<br><b>RoccOskar, LLC</b> |                         |
| 3. List the fictitious business name to be used:<br><b>arc(hive) book + snackery</b>                                                                                          |                                                           |                         |
| 4. List the state or country the entity is incorporated:<br><b>Rhode Island</b>                                                                                               | 5. List the date of incorporation:<br><b>1/1/2022</b>     |                         |
| 6. List the address of its registered office within Rhode Island:                                                                                                             |                                                           |                         |
| Street Address<br><b>97 Child Street</b>                                                                                                                                      |                                                           |                         |
| City<br><b>Warren</b>                                                                                                                                                         | State<br><b>RHODE ISLAND</b>                              | Zip<br><b>02885</b>     |
| 7. List the business in which it is engaged:<br><b>food and beverage sales and used bookstore</b>                                                                             |                                                           |                         |
| 8. Applicant is otherwise authorized to do business in the state of Rhode Island.                                                                                             |                                                           |                         |
| <b>Under penalty of perjury, I declare and affirm that I have examined this Fictitious Business Name State and that the information contained herein is true and correct.</b> |                                                           |                         |
| Name of Authorized Officer of the Corporation<br><b>Uriah Donnelly</b>                                                                                                        |                                                           | Date<br><b>12/21/21</b> |
| Signature of Authorized Officer of the Corporation<br> <b>SIGN DOCUMENT HERE</b>           |                                                           |                         |

**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** <sup>m</sup>

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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.



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Nellie M. Gorbea**, *Secretary of State*

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:

December 24, 2021 03:04 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea", is written in a cursive style.

Nellie M. Gorbea  
*Secretary of State*

