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State of Rhode Island

Department of State - Business Services Division

Pursuant to the provisions of RIGL 7-16-9 the undersigned limited liability company hereby

Fictitious Business Name Statement DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

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submits the following stateme a fictitious business name:	nt for authority to transact busine	ess in the state of Rhode Island	under
1. Entity ID Number:	2. The name of the Limited Liability Company is:		
1742004	Blueprint Brands, LLC		
3. The fictitious business nar	ne to be used is:		
Apollo & Luna			
4. The state or country the entity is formed is:		5. The date of formation is:	
Delaware		09/19/2022	
6. Applicant is otherwise auth	norized to do business in the stat	e of Rhode Island.	
Under penalty of perjury, I de information contained hereln	eclare and affirm that I have exant is true and correct.	nined this Fictitious Business Na	ame Statement and that the
Name of Applicant Limited Liability Company			Date
Blueprint Brands, LLC			09/ <u>36</u> /2022
Signature of Authorized Pers	99		· · · · · · · · · · · · · · · · · · ·
W/C	oe e		

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

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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:

October 06, 2022 11:23 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

