



State of Rhode Island

Department of State - Business Services Division

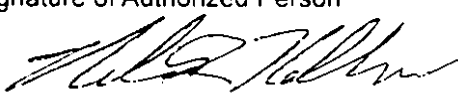
## Fictitious Business Name Statement

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$20.00

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R.I. DEPT OF STATE  
BUS SVCS DIV  
FOR  
SECRETARY OF STATE  
2022 DEC -5 PM 2:40

Pursuant to the provisions of RIGL 7-6-11 the undersigned non-profit 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: <b>00716164</b>	2. The name of corporation: <b>Solar Therapeutics Rhode Island, Inc.</b>
3. The fictitious business name to be used is: <b>Solar Cannabis Co.</b>	
4. The corporation is organized under the laws of: <b>Rhode Island</b>	5. The date of incorporation is: <b>12/11/2020</b>
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.	
Name of Applicant Non-Profit Corporation <b>Solar Therapeutics Rhode Island</b>	
Title of Authorized Person <b>CEO</b>	Date <b>12/5/22</b>
Signature of Authorized Person 	

### MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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TARY OF STATE  
BY **MS DJEP**

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](mailto:corporations@sos.ri.gov).

FORM 626 Non-Profit - Revised 12/2021