



Fictitious Business Name Statement

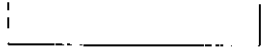
DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

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Pursuant to the provisions of RIGL 7-16-9 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.



1. Entity ID Number:		2. The name of the Limited Liability Company is: Axia Financial, LLC	
3. The fictitious business name to be used is: Kevnik Mortgage			
4. The state or country the entity is formed is: Washington		5. The date of formation is: 6/27/2007	
6. Applicant is otherwise authorized to do business in the state of Rhode Island.			
<i>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</i>			
Name of Applicant Limited Liability Company Quinn Brown, CFO		Axia Financial, LLC	Date 12-28-2022
Signature of Authorized Person <i>Quinn Brown</i>			

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
 JAN 04 2023
 BY ML VFMZ
 11:00

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.