



State of Rhode Island  
Department of State - Business Services Division

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### Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee \$50.00

Pursuant to the provisions of RIGL 7-1.2-402, 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.		2. The name of the Corporation is:  OR Nurses Nationwide, Inc.	
3. The fictitious business name to be used is:  Travel Nurses, Inc.			
4. The corporation is organized under the laws of:  Texas		5. The date of incorporation is:  08/03/2010	
6. The address of its registered office within Rhode Island is:  Street Address 47 Wood Ave, Ste 2			
City Barrington		State RHODE ISLAND	Zip 02806
7. The business in which it is engaged:  We are a healthcare staffing agency that provides temporary labor to hospitals and other medical facilities all throughout the country.			
8. Applicant is otherwise authorized to do business in the state of Rhode Island.			
9. 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 Authorized Officer of the Corporation  Julie Michelle Davis			Date  07/11/2023
Signature of Authorized Officer of the Corporation  <i>Julie Michelle Davis</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

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