

Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

FORM 624A - Revised - 04/2023

Pursuant to the provisions of RIGL <u>7-1.2-402</u>, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of 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:		
1761392	Comprehensive Engineering, P.C.		
3. The fictitious business nam	ne to be used is:		
Comprehensive Engi	neering		
4. The corporation is organized under the laws of:		5. The date of incorporation is:	
State of Michigan		8/8/2023	
6. The address of its registered	ed office within Rhode Island is:		
Street Address 450 Veterans	s Memorial Parkway, Suite	7A	
City East Providence		State RHODE ISLAND	Zip 02914
	ACTICE OF ENGINEERING RRED UPON PROFESSIO		Y THE LAW AND WITH ALL BY THE STATE.
8. Applicant is otherwise auth	orized to do business in the stat	e of Rhode Island.	
9. Under penalty of perjury, I of information contained herein in		amined this Fictitious Busine	ess Name Statement and that the
Name of Authorized Officer of the Corporation			Date
Kenneth Reigler 7			8/3/2023
Signature of Authorized Office	prof the Corporation		
MAIL TO: Division of Business Services 148 W. River Street, Providence, f Phone: (401) 222-3040 Website: www.sos.n.gov	V Rhode Island 02904-2615	•	AUG 0 4 2023

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.