



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$50.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Domestic Limited Liability Company  
Statement of Abandonment of Use of Fictitious Business Name**  
(Section 7-16-9 of the General Laws of Rhode Island, 1956, as amended)

**SECTION I**

The legal name of the applicant limited liability company is: 1119 Park Ave Animal Hospital, LLC

**SECTION II**

The fictitious business name being abandoned is:

Oaklawn Animal Hospital

The date when the original fictitious business name statement was filed is 1/13/2022

**SECTION III**

The state or territory under the laws of which it is organized is  
State: RI Country: USA

**SECTION IV**

The date of organization is 10/08/2021

**Signed this 17 Day of August, 2023 at 1:15:44 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

1119 Park Ave Animal Hospital, LLC  
Name of Applicant Limited Liability Company

BRION REAGOR  
Signature of Authorized Person





State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

I, GREGG M. AMORE, 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:

August 17, 2023 01:13 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore  
*Secretary of State*

