

State of Rhode Island

Department of State - Business Services Division

Pursuant to the provisions of RIGL 7-1.2-402, the undersigned business corporation hereby submits

Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

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the following statement for aut fictitious business name:	thority to transact business in	n the state of Rhode Island unde	er a	
Entity ID Number:	2. The name of the Corporation is:			
001766773	U.S. Venture, Inc.			
3. The fictitious business nar	ne to be used is:			
U.S. AutoForce				
4. The corporation is organized under the laws of:		5. The date of incorporation	5. The date of incorporation is:	
Wisconsin		12/20/2023	12/20/2023	
6. The address of its register	ed office within Rhode Island	d is:		
Street Address C T Corporation	System, 450 Veterans Memori	al Parkway, Stc 7A		
City East Providence		State RHODE ISLAND	Zip 02914	
7. The business in which it is Wholesale Distribution of Tire				
Applicant is otherwise auti	horized to do business in the	state of Rhode Island.		
Under penalty of perjury, I information contained herein		ve examined this Fictitious Busin	ness Name Statement and that the	
Name of Authorized Officer of the Corporation			Date	
Thomas E. Evans, Secretary			1/5/2024	
Signature of Authorized Office	cer of the Corporation	·····		
DocuSigned by:				

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 1.44

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BY XYXXT

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.