



State of Rhode Island
Department of State - Business Services Division



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Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

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: 007766103	2. The name of the Limited Liability Company is: American Honda Insurance Solutions, LLC	
3. The fictitious business name to be used is: Honda Insurance Solutions		
4. The state or country the entity is formed is: Delaware	5. The date of formation is: 07/10/2023	
6. Applicant is otherwise authorized to do business in the state of Rhode Island.		
7. 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 Applicant Limited Liability Company Wendi Sheehan, VP of American Honda Insurance Solutions, LLC		Date 1/9/2024
Signature of Authorized Person 		

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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JAN 11 2024
BY 147394

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.



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:

January 11, 2024 10:10 AM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

