



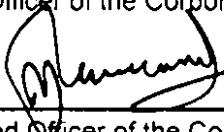
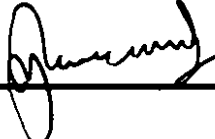
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### Fictitious Business Name Statement

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: <b>001767141</b>		2. The name of the Corporation is: <b>SHIVARAM, INC</b>	
3. The fictitious business name to be used is: <b>SMOKE BREAK</b>			
4. The corporation is organized under the laws of: <b>RHODE ISLAND</b>		5. The date of incorporation is: <b>1/1/2024</b>	
6. The address of its registered office within Rhode Island is:			
Street Address <b>391 MENDON ROAD, SUITE: D</b>			
City <b>CUMBERLAND</b>		State <b>RHODE ISLAND</b>	Zip <b>02864</b>
7. The business in which it is engaged: <b>SMOKE SHOP</b>			
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  <b>MAYUR PATEL</b>			Date <b>1/8/2024</b>
Signature of Authorized Officer of the Corporation 			

**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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BY 92JRZ

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.