



State of Rhode Island

Department of State - Business Services Division

REC'D RIDGESS BSD
24 MAR 7 PM 4:48:52
STAMP

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: 001663587	2. The name of the Limited Liability Company is: Community Veterinary Clinics, LLC
3. The fictitious business name to be used is: VIP Petcare	
4. The state or country the entity is formed is: Delaware	5. The date of formation is: 5/24/2016
6. Applicant is otherwise authorized to do business in the state of Rhode Island.	
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 KARA KOROSEC, SECRETARY OF PETIQ, LLC, ITS MEMBER	Date 03/05/2024
Signature of Authorized Person <i>Kara Korosec</i>	

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

MAR 07 2024

BY *ML* 16773

1:48

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.

FORM 624B LLC - Revised: 08/2020