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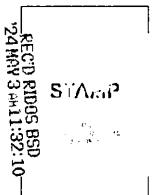


## State of Rhode Island Department of State - Business Services Division

## **Fictitious Business Name Statement**

**DOMESTIC or FOREIGN Limited Liability Company** 

→ Filing Fee: \$50.00



Pursuant to the provisions of RIGL <u>7-16-9</u> 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:  | 2. The name of the Limited Liability Company is: |                |                              |           |  |
|---|--|----------------|------------------------------|-----------|--|
| 000144379   | Conlon Container, LLC                            |                |                              |           |  |
| 3. The fictitious business n  | ame to be used is:                               | ·· · · · - · · |                              |           |  |
| Go Mini's of Southern New England   |  |                |                              |           |  |
| 4. The state or country the entity is formed is:  |  |                | 5. The date of formation is: |           |  |
| Rhode Island  |  | 12/03          | 12/03/2004                   |           |  |
| 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   |  |                |                              | Date      |  |
| David Thompson  |  |                |                              | 4/26/2024 |  |
| Signature of Authorized Person  |  |                |                              |           |  |
| A>  | 50   | <b>-</b> -     | 4/28/20                      | 24        |  |
|   | <del>)-</del>                                    |                |                              |           |  |

**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 31.32 MAY 03 2024 11:32 BY Kg8g K RI SOS Filing Number: 202453972330 Date: 5/3/2024 11:32:00 AM



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:

May 03, 2024 11:32 AM

Gregg M. Amore Secretary of State

Treg M. Coure

