



State of Rhode Island  
Department of State - Business Services Division

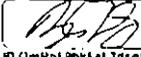
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### Fictitious Business Name Statement

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: <b>001759766</b>	2. The name of the Limited Liability Company is: <b>Jacquard Property Group, LLC</b>
3. The fictitious business name to be used is: <b>Out of Eden Landscaping</b>	
4. The state or country the entity is formed is: <b>Rhode Island</b>	5. The date of formation is: <b>7/2/23</b>
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 <b>Beau J. Jacquard, Member</b>	Date <b>5/24/24</b> 5/24/2024
Signature of Authorized Person  <small>10 QmRhf 96kf al 3dsq93i Lad27X</small>	

**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**  
**MAY 24 2024**  
BY GN JSZ  
APC  
3:00

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:

May 24, 2024 03:00 PM

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

Gregg M. Amore  
*Secretary of State*

