



State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
24 JUN 26 AM 9:31:00

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. 000120591		2. The name of the Corporation is: CBIZ Life Insurance Solutions, Inc.	
3. The fictitious business name to be used is: CBIZ Individual Insurance Solutions			
4. The corporation is organized under the laws of Ohio		5. The date of incorporation is 10/01/2001	
6. The address of its registered office within Rhode Island is: Street Address 10 Dorrance Street #700			
City Providence		State RHODE ISLAND	Zip 02903
7. The business in which it is engaged: insurance agent / broker			
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 Bruce J. Kowalski			Date 6/25/2024
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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JUN 26 2024
BY SWJTG
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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.