

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 <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:

Entity ID Number:	2. The name of the Limited Liability Company is:			
001777530	NARDOLILLO GROUP, LLC			
3. The fictitious business nam	ne to be used is:	· · · · · · · · · · · · · · · · · · ·		
TOAST N TAP				
4. The state or country the entity is formed is:		5. The date of formation	on is:	
RHODE ISLAND		AUGUST 15, 2	AUGUST 15, 2024	
6. Applicant is otherwise authorise	orized to do business in t	he state of Rhode Island.		
7. Under penalty of perjury, I of information contained herein in	declare and affirm that I h is true and correct.	nave examined this Fictitious B	usiness Name Statement and that the	
Name of Applicant Limited Liability Company			Date	
NARDOLILLO GROUP,			9/5/24	
Signature of Authorized Person	1 /		- <u> </u>	

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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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.