

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:	2. The name of the Limited Liability Company is:			
001780211	Liberty Distribut	Liberty Distribution, LLC		
3. The fictitious business (name to be used is:	·		
Mighty Auto Parts	of Rhode Island			
4. The state or country the entity is formed is:		5. The date of forma	5. The date of formation is:	
Rhode Island		10/24/2024		
6. Applicant is otherwise a	authorized to do business in	the state of Rhode Island.		
7. Under penalty of perjury information contained her		have examined this Fictitious	Business Name Statement and that the	
Name of Applicant Limited Liability Company		Date		
Joseph Felicio		10/24/2024		
Signature of Authorized P	erson			

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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