

State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BS

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:

iD 2: 19	. (# 1

1. Entity ID Number:	2. The name of the Limited Liability Company is: Smack Image Grap LLC			
	Smack I	mage Grup		
3. The fictitious business nam	ne to be used is:		-	
4. The state or country the en	_ 	5. The date of formation is:		
Gr. The state of country the en	5. The date of formation is:		2-24	
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 PWORP PROOSA		Date 11-22-27		
Signature of Authorized Perso		24		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Phode Island 0

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 **Website:** www.sos.ri.gov

NOV 2 2 2024 VC980 933 RI SOS Filing Number: 202461269510 Date: 11/22/2024 9:33:00 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:

November 22, 2024 09:33 AM

Gregg M. Amore Secretary of State

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