

State of Rhode Island **Department of State - Business Services Division** 

## **Fictitious Business Name Statement**

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

		dersigned business corporation her		
the following statement for a lictitious business name:	uthority to transact busin	ness in the state of Rhode Island ur	ider a	
Entity ID Number:				
	DENTAL SERVICES	P.A.		
<u> </u>		· · · <del>- · ·</del>	· ·	
3. The fictitious business na	_	RI DOS MADE EDITS	DED FILER	
AIRPORT ORAL SURGE	RY CORY	BI DOS MADE EDIT	) LEK LITTIK	
4. The corporation is organized under the laws of:		5. The date of incorpora	5. The date of incorporation is:	
DELAWARE		11/20/2019	11/20/2019	
6. The address of its registe	ered office within Rhode	Island is:		
Street Address				
95 AIRPORT ROAD				
City		State RHODE ISLAND	Zip	
WARWICK		KHODE ISLAND	02880	
7. The business in which it	is engaged:			
DENTISTRY				
8. Applicant is otherwise au	thorized to do business	in the state of Rhode Island.		
<ol><li>Under penalty of perjury, information contained here</li></ol>		t I have examined this Fictitious Bu	siness Name Statement and that the	
Name of Authorized Officer of the Corporation			Date / /	
WAYLAND A EASLEY			11/11/2029	
Signature of Authorized Officer of the Corporation				
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			with Fifth	
ALAU TO.			FILED	

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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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 03:52 PM

Gregg M. Amore

Secretary of State

Tregs M. Coure

