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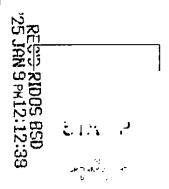


State of Rhode Island
Department of State - Business Services Division

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:

1. Entity ID Number:	2. The name of the Limited Liability Company is:		
001771558	Veterinary Emergency Group, LLC		
3. The fictitious business name to be used is:			
VEG ER for Pets			
4. The state or country the entity is formed is:		5. The date of formation is:	
DE		06/26/2017	>
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			Date
Veterinary Emergency Group, Inc.			1/1/2025
Signature of Authorized Person			
DocuSigned by:			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 0 9 2025 SIZ. . 3
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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:

January 09, 2025 12:12 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

