



State of Rhode Island
Department of State - Business Services Division

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2025 JAN 15 PM 1:56

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:

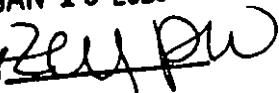
1. Entity ID Number: 001713078	2. The name of the Limited Liability Company is: Tribe Academy LLC
3. The fictitious business name to be used is: Courage Builder	
4. The state or country the entity is formed is: Rhode Island	5. The date of formation is: 09/22/2020
6. Applicant is otherwise authorized 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 Nishita Roy-Pope	Date 01/13/2025
Signature of Authorized Person 	

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

JAN 15 2025

BY 
AA 1:56pm.

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.