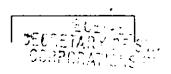
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State of Rhode Island Department of State - Business Services Division

between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.



2025 JAN 17 AH 10: 24

FORM 624A - Revised: 01/2024

Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

,g				
•	_	ned business corporation here the state of Rhode Island und	•	
1. Entity ID Number:	2. The name of the Corporation is:			
001709188	G Hospitality, Inc.			
3. The fictitious business nam	e to be used is:			
Illumafi Lighting			i	
4. The corporation is organized under the laws of:		5. The date of incorporation	5. The date of incorporation is:	
Domestic Profit Corporation L.T.		June 26 2020	June 26 2020	
6. The address of its registere	ed office within Rhode Island	1 is:		
Street Address 6 Meghan Ci	rele 3970 Pos	t e)		
City	wick	State RHODE ISLAND	02828 UZ 886	
	declare and affirm that I hav		ness Name Statement and that the	
information contained herein is true and correct.			Date	
Name of Authorized Officer of the Corporation				
Gary Cardono			1/14/2025	
Signature of Authorized Office	er of the Corporation			
MAIL TO:	AADE	NOW SUBSTANTIVE EDITS	<u> </u>	
Division of Business Services 148 W. River Street, Providence, Phone: (401) 222-3040	Rhode Island 02904-2615	F	ILED 10:24	
Website: www.sos.ri.gov JAN 17 2025				
		BYIH	1 AP7	
lf you have any questions, p	lease call us at (401) 222-3	3040, Monday through Friday,		

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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 17, 2025 10:24 AM

Gregg M. Amore

Secretary of State

Treg M. Coure

