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

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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:

a fictitious business name:					
1. Entity ID Number:	2. The name of the Limited Liability Company is:				
001784065	Infosys Nova Holdings LLC				
3. The fictitious business	name to be used is:				
Kaleidoscope Innovation					
4. The state or country th	e entity is formed is:	5. The date of forma	5. The date of formation is:		
Delaware		1/13/2025	1/13/2025		
6. Applicant is otherwise	authorized to do business in th	ne state of Rhode Island.			
7. Under penalty of perjuinformation contained he	ry, I declare and affirm that I have rein is true and correct.	ave examined this Fictitious	Business Name Statement and that the		
Name of Applicant Limited Liability Company			Date		
Infosys Nova Holdings LL	1/17/2025				
Signature of Authorized (_	hury McGinnes	•		

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 23 2025

BY ACTWO

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.