



State of Rhode Island  
Department of State - Business Services Division

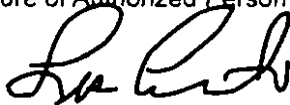
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### Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 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:  001738945	2. The name of the Limited Liability Company is:  NETWORK INNOVATIONS, LLC
3. The fictitious business name to be used is:  Nitel	
4. The state or country the entity is formed is:  Delaware	5. The date of formation is:  09/13/2007
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  Lisa Taranto	Date  02/21/2025
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  
 STAMP**  
 FEB 24 2025  
 BY DJHHH  
 AA. 12:58 pm.

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.