



State of Rhode Island
Department of State - Business Services Division

Fictitious Business Name Statement

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-6-11 the undersigned non-profit corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

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1. Entity ID Number:	2. The name of corporation: National Collegiate Inventors & Innovators Alliance, Inc.
3. The fictitious business name to be used is: VentureWell	
4. The corporation is organized under the laws of: Boston, Massachusetts	5. The date of incorporation is: April 11, 2007
<i>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.</i>	
Name of Applicant Non-Profit Corporation Chris Desrosiers	
Title of Authorized Person VP, Finance and Administration	Date March 18, 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
MAR 24 2025
BY ZDW/EC
AMF 10:45

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.