



State of Rhode Island
Department of State - Business Services Division

Fictitious Business Name Statement

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$20.00

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FOR
SECRETARY OF STATE
USE ONLY

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:

1. Entity ID Number: <i>001749839</i>	2. The name of corporation: <i>Sincere Multiservice Inc</i>
3. The fictitious business name to be used is: <i>Community Biz Connect</i>	
4. The corporation is organized under the laws of: <i>Rhode Island</i>	5. The date of incorporation is: <i>12/16/2022</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.	
Name of Applicant Non-Profit Corporation <i>Sincere Multiservice Inc</i>	
Title of Authorized Person <i>CEO</i>	Date <i>5/19/2025</i>
Signature of Authorized Person <i>Shaulyn Martinez</i>	

MAIL TO:

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

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BY *97H9M*
10:18

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.