

Fictitious Business Name Statement

STAMP

FOR SECRETARY OF STATE

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

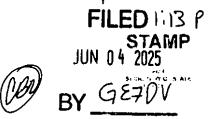
Pursuant to the provisions of RIGL <u>7-1,2-402</u>, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a firtitious business name

fictitious business name.			<u> </u>	
1. Entity ID Number:	2. The name of the Corpo	ration is.		
	Asterism USA, Inc.	Asterism USA, Inc.		
3. The fictitious business r	name to be used is:			
Asterism Healthcare				
The corporation is organized under the laws of:		5. The date of incorporation	5. The date of incorporation is:	
Oregon		June 18, 2014	June 18, 2014	
6. The address of its regis	tered office within Rhode Island	d is:		
Street Address SEG Hub, 10 Davol S	Square, Suite 100			
City Providence		State	Zip	
		RHODE ISLAND	02903	
7. The business in which i	t is engaged:			
Planning, productio	n, and sales of IT softwar	xport of functinal ingredients e and digital content xport of pet food and animal		
8. Applicant is otherwise a	uthorized to do business in the	state of Rhode Island.		
9. Under penalty of perjury information contained here		ve examined this Fictitious Busine	ss Name Statement and that the	
Name of Authorized Officer of the Corporation			Date	
Pabel Delgado			June 5, 2025	
Signature of Authorized O	fficer of the Corporation			
13796				

MAIL TO:

Division of Business Services148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov



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.