



## State of Rhode Island

## **Department of State - Business Services Division**

## **Fictitious Business Name Statement**

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

5 JW 27 P 12: 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:

Entity ID Number:	2. The name of the Limited Liability Company is:			
001736816	Nine Twelve Holdings RI S1, LLC			
3. The fictitious business n	ame to be used is:			
Nine Twelve Home	Services			
4. The state or country the entity is formed is:			5. The date of formation is:	
Rhode Island			03/01/2022	
6. Applicant is otherwise a	uthorized to do business in	the stat	e of Rhode Island.	
7. Under penalty of perjury information contained here		have ex	amined this Fictitious Business	Name Statement and that the
Name of Applicant Limited Liability Company			Date	
Nine Twelve Holdings RI S1, LLC				06/24/2025
Signature of Authorized Pe	erson			
Daniel M.	Lawton, Men	nber		

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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12:00

RI SOS Filing Number: 202576366030 Date: 6/27/2025 12:00:00 PM



I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

June 27, 2025 12:00 PM

Gregg M. Amore Secretary of State

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