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State of Rhode Island

**Department of State - Business Services Division** 

Pursuant to the provisions of RIGL 7-6-11 the undersigned non-profit corporation hereby submits

## **Fictitious Business Name Statement**

**DOMESTIC or FOREIGN Non-Profit Corporation** 

→ Filing Fee: \$20.00

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the following statement for authority to transact business in the state of Rhode Island under a fictitious business name: 1. Entity ID Number: 2. The name of corporation: 001774531 CASA Moda International Inc. 3. The fictitious business name to be used is: Ultra Model USA 4. The corporation is organized under the laws of: 5. The date of incorporation is: RI 05/29/2024 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 Title of Authorized Person Date Signature of Authorized Perso

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 STANIP AUG 2 2 2025 228 BY LETRG RI SOS Filing Number: 202577790780 Date: 8/22/2025 2:48:00 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:

August 22, 2025 02:48 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

