



State of Rhode Island  
Department of State - Business Services Division

## Application for Reservation of Entity Name

DOMESTIC or FOREIGN Entity

- Business Corporation Filing Fee: \$50.00 → Partnership Filing Fee: \$50.00  
→ Limited Liability Company Filing Fee: \$50.00 → Non-Profit Corporation Filing Fee: \$20.00

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The undersigned applicant applies for reservation of the following entity name for a non-renewable period of 120 days from the date of this filing:

1. The name to be reserved is:		
Green Witch Farm		
2. The name is being reserved for the entity type listed below:		
<input type="checkbox"/> Business Corporation (including Professional and Foreign Corporations) RIGL 7-1.2-403 <input type="checkbox"/> Partnership (including Foreign Partnerships) RIGL 7-13.1-115 or 7-12.1-906 <input checked="" type="checkbox"/> Limited Liability Company (including Foreign Limited Liability Companies) RIGL 7-16-10 <input type="checkbox"/> Non-Profit Corporation (including Foreign Non-Profit Corporations) RIGL 7-6-11.1		
3. The name reservation will be recorded exclusively in the name of the applicant. The right to the exclusive use of a specified entity name so reserved may be transferred to any other person by filing in the office of the RI Department of State a notice of the transfer, executed by the applicant for whom the name was reserved, specifying the name and address of the transferee, and paying the appropriate fee.		
4. List the Name of Applicant:		
Lauren Kasz		
Address:		
320 Sharpe St.		
City/Town:	State:	Zip Code:
West Greenwich	RI	02817
5. Under penalty of perjury, I declare and affirm that the information contained herein is true and correct.		
Submitted by:		
Lauren Kasz		
Address:		
320 Sharpe St.		
City/Town:	State:	Zip Code:
West Greenwich	RI	02817
Signature of Authorized Person		Date
[Signature]		9/1/2025

### MAIL TO:

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

FILED

SEP 10 2025 STAMP  
3:17  
BY [Signature] SECRETARY OF STATE

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](mailto:corporations@sos.ri.gov).



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

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:

September 10, 2025 03:17 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized.

Gregg M. Amore  
*Secretary of State*

