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State of Rhode Island

Department of State - Business Services Division

A. REC'D RIDOS BSD 25 OCT 8 PKJ:03:37

Fictitious Business Name Statement

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
fictitious business name:

Entity ID Number:	2. The name of the Corporation is:			
001795488	ConsumerInfo.com, Inc.			
3. The fictitious business name to be used is:				
Experian Consumer Services				
4. The corporation is organized under the laws of:		5. The date of incorporation is:		
California		05/24/1993		
6. The address of its registere	ed office within Rhode Island is:			
Street Address 450 VETERANS MEMORIAL PARKWAY, SUITE 7A				
City EAST PROVIDENCE		State RHODE ISLAND	Zip 02914	
7. The business in which it is	engaged:			
INFORMATION SERVICES				
			•	
Applicant is otherwise authorized to do business in the state of Rhode Island.				
			A. O	
Under penalty of perjury, I information contained herein		xamined this Fictitious Business		
Name of Authorized Officer of the Corporation			Date	
STEPHANIE HENCZ, ATTORNEY IN FACT			10/07/2025	
Signature of Authorized Officer of the Corporation				
Starture Honoy				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 0 8 2025) P BY & XGFLO

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.

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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:

October 08, 2025 01:09 PM

Gregg M. Amore Secretary of State

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