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## State of Rhode Island Department of State - Business Services Division

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2023 JUL -3 P 1: 42

## **Fictitious Business Name Statement**

DOMESTIC or FOREIGN Partnership

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-12.1-902.1</u> or <u>7-13.1-114.1</u> the undersigned limited partnership 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 Partnership is:		
001750042	Damiano & Company LLP		
3. The fictitious business na	ame to be used is:	· •	
Damiano & Co			
4. The state or country the entity was formed in is:		5. The date of registration is:	
RI		Upon Filing	
6. Applicant is otherwise au	thorized to do business in th	e state of Rhode Island.	
7. Under penalty of perjury, information contained herei		ve examined this Fictitious	Business Name Statement and that the
Name of Applicant Partnership			Date
Damiano & Company LLP			6/30/23
Signature of General Partners	er or Authorized Person	)	
	<i>'</i>		

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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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:

July 03, 2023 01:42 PM

Gregg M. Amore Secretary of State

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