



Instructions for Filing Non-Profit Corporation Fictitious Business Name Statement

[Section 7-6-11](#) of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

All filings are public records under RIGL [38-2-1](#), et seq. This means all information is available to the public by a variety of methods including, without limitations, inspections at our office, telephone inquiries and electronically through our online database.

This legal document should be typed. All illegible documents will be REJECTED.

How to complete the form:

1. List the entity's ID number. The ID number can be found by looking up your entity in the [Corporate Database](#).
2. List the name of the non-profit corporation. The entity name can be verified through our [Corporate Database](#). If the corporate name has changed, an amendment, form [201](#) or form [251](#), must be filed with this office. [Electronic filing](#) may be available.
3. List the fictitious business name the entity would like to use. Your fictitious business name must be distinguishable from any name on file in this office. You may check [name availability](#) on our website; however, this does not ensure the name will still be available upon filing.
4. List the state or country of incorporation.
5. Domestic entities **MUST** list the date of incorporation. Foreign entities **MUST** list the date of qualification in Rhode Island. The entity's date of incorporation/qualification can be verified through our [Corporate Database](#).
6. An Authorized Person of the non-profit corporation **MUST** sign and date the form.

How to pay the filing fee:

The filing fee is \$20, payable either by mail via check made payable to RI Department of State or in person via cash, credit card, or check at the Business Services Division, 148 W. River Street, Ste. 1, Providence, RI 02904. Contact our office at (401) 222-3040 for further information.

How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will **NOT** result in a mailed confirmation. Filings that cannot be processed will be posted [online](#) and then returned. To confirm your submission and obtain evidence of your filing:

- Go to our [Corporate Database](#)
- Enter the name or ID number of your entity and click "Search"
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing"
- Identify desired type of filing and click on "PDF" under "View PDF" to view and print the record

How to maintain your status:

The corporation is responsible for filing an annual report each calendar year, excluding the year of incorporation, between June 1 and June 30. A courtesy reminder will be mailed to the registered agent prior to June 1 of each year. Be sure to follow up with your registered agent concerning the filing of this report. Failure to file an annual report or maintain a registered agent/office will result in the revocation of the Articles of Incorporation/ Authority pursuant to RIGL [7-6-56](#) and [7-6-85](#).

Your entity may require additional licensing. Please visit our [website](#) for further information.



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FOR SECRETARY OF STATE USE ONLY

Fictitious Business Name Statement

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL [7-6-11](#) the undersigned non-profit corporation hereby submits 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:	
3. The fictitious business name to be used is:		
4. The corporation is organized under the laws of:	5. The date of incorporation is:	
<i>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.</i>		
Name of Applicant Non-Profit Corporation		
Title of Authorized Person	Date	
Signature of Authorized Person		

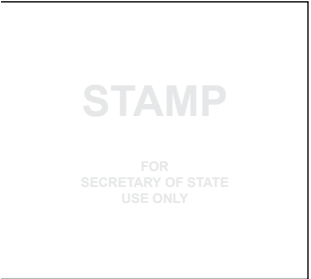
MAIL TO:

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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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.



Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. **All fields are REQUIRED.**

Name:		Date:
Entity Name:		
Street Address:		
City:	State:	Zip Code:
Email Address:		Phone Number: