

State of Rhode Island and Providence Plantations Office of the Secretary of State

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Certificate Request Form

Request Information (Entity Name is only required for a Certificate of Non-Existence)

ID	ENTITY NAME	CERTIFICATE TYPE
000733906	Linear Title Agency, Ltd.	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: JOE MURPHY

Business Name: LINEAR TITLE AND CLOSING, LTD.

No. and Street: 127 JOHN CLARKE ROAD

City or Town: MIDDLETOWN State: \underline{RI} Zip: $\underline{02842}$ Country: \underline{USA}

Contact Phone: (401) 841-9991 ext:

Contact Email: <u>JMURPHY@LINEARTITLE.COM</u>

Please provide an email address to receive an expedited response from us if the filing is rejected for

any reason. If no email address is provided, we will respond by mail.

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