



**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
000145614	PRI X Beverage Services, LLC	Good Standing Certificate
000104948	INP Beverage Services, Inc.	Good Standing Certificate

**Total Fee: \$42.00**

**Filer's Contact Information**

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

Contact Name: MICHELLE JOYAL

Business Name: THE PROCACCANTI GROUP

No. and Street: 1140 RESERVOIR AVENUE

City or Town: CRANSTON State: RI Zip: 02920 Country: USA

Contact Phone: (401) 946-4600 ext:

Contact Email: MJOYAL@TPGCOMPANIES.COM

**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.**