



**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
000081461	COASTAL RESORTS INTERNATIONAL, INC.	Letter of Status / Legal Existence

Total Fee: \$74.50

Filer's Contact Information

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

Contact Name: MATTHEW SOLDAVINI

Business Name: MATTHEW JOHN SOLDAVINI, P. A.

No. and Street: 791 10TH STREET SOUTH, SUITE 301

City or Town: NAPLES State: FL Zip: 34102 Country: USA

Contact Phone: (239) 262-7230 ext:

Contact Email: MATT@SWFLACPA.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.