



**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          |
|-----------|-------------------------|---------------------------|
| 000157949 | One Barbara Circle, LLC | Good Standing Certificate |

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: RICHARD JOHNSON

Business Name: ONE BARBARA CIRCLE, LLC

No. and Street: 1026 MASSACHUSETTS AVENUE  
SUITE 1

City or Town: ARLINGTON

State: MA Zip: 02476

Country: USA

Contact Phone: ext:

Contact Email: MICHELLE@BURKEANDASSOC.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.**