RALPH MOIL	State of Rhode Island and Providence Plantations Office of the Secretary of State		
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	CER	RTIFICATE TYPE
000119072	ANCHOR SELF STORAGE OF NARRAGANSETT, LLC	Good	Standing Certificate
Total Fee: \$22.00 Filer's Contact Information (Enter a contact name, mailing address and email.) Contact Name: SCOTT WOLF, ESQ. Business Name:SCHLOSSBERG, LLC No. and Street: 35 BRAINTREE HILL OFFICE PARK SUITE 204 City or Town: BRAINTREE Contact Phone: (781) 848-5028 ext: Contact Email: SWOLF@SABUSINESSLAW.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.			
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