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
000484862	WAMP FITNESS, LLC	Good Standing Certificate

Total Fee: $22.00

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: BRADFORD ELIOT KEENE
Business Name: LO BRADFORD ELIOT KEENE
No. and Street: 7 KIMBALL LANE
SUITE B
City or Town: LYNNFIELD State: MA Zip: 01940 Country: USA
Contact Phone: (781) 246-4545 ext:
Contact Email: BRAD@BRADLAW.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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