



**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
000144858	FORE FITNESS GROUP, 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.**