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
000921438	Vasquez Distribuitors, LLC	Long Form Good Standing

Total Fee: $32.00

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

Contact Name: PEDRO VASQUEZ
Business Name: VASQUEZ DISTRIBUTORS,LLC
No. and Street: 70 WASHINGTON ST
City or Town: CENTRAL FALLLS State: RI Zip: 02863 Country: USA
Contact Phone: (401) 359-3050 ext:
Contact Email: RAMIREZL775@GMAIL.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.