



**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          |
|-----------|-------------|---------------------------|
| 000901358 | Fringe, LLC | Good Standing Certificate |

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: JOANNE HOLIHEN

Business Name: PONTE INVESTMENTS

No. and Street: 42 LADD STREET STE 315

City or Town: EAST GREENWICH

State: RI

Zip: 02818

Country: US

Contact Phone: ext:

Contact Email: JHOLIHEN@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.**