



**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
001664069	RIMI Forest MHP, LLC	Good Standing Certificate

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: JULIE WAGNER

Business Name: RV HORIZONS, INC

No. and Street: PO BOX 457

City or Town: CEDAREdge

State: CO Zip: 81413

Country: USA

Contact Phone: (970) 856-7474 ext:

Contact Email: JWAGNER@RVHMANAGEMENT.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.**