



**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
001658903	Springtide Properties, LLC	Good Standing Certificate

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: VINCENT MONTECALVO

Business Name:

No. and Street: 33 COLLEGE HILL ROAD  
BUILDING 5

City or Town: WARWICK State: RI Zip: 02886 Country: USA

Contact Phone: (401) 823-6266 ext:

Contact Email: VIN@MONTECALVOLAW.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.**