



**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
000576309	Atlantic Closing & Escrow of Rhode Island, LLC	Long Form Good Standing

**Total Fee: \$32.00**

**Filer's Contact Information**

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

Contact Name: CANDY MCKINNEY

Business Name: SIS

No. and Street: 1610 S OLD DECKER RD

City or Town: VINCENNES

State: IN Zip: 47591 Country: USA

Contact Phone: (812) 494-2392 ext:

Contact Email: CWMCKINNEY@SUPPORTIVEIS.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.**