



**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
000033895	The Clambake Club of Newport	Good Standing Certificate

**Total Fee: \$7.00**

**Filer's Contact Information**

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

Contact Name: LAUREN JENNINGS

Business Name: THE CLAMBAKE CLUB OF NEWPORT

No. and Street: 353 TUCKERMAN AVENUE

City or Town: MIDDLETOWN

State: RI

Zip: 02842

Country: US

Contact Phone: 401-847-5237 ext:

Contact Email: OFFICE@THECLAMBAKECLUB.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.**