



**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
001018604	OLD ISLAND PUB, LLC	Good Standing Certificate

**Total Fee: \$74.50**

**Filer's Contact Information**

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

Contact Name: LEWIS GAFFETT

Business Name: OLD ISLAND PUB

No. and Street: PO BOX 1047

City or Town: BLOCK ISLAND

State: RI

Zip: 02807

Country: USA

Contact Phone: (401) 477-4743 ext:

Contact Email: PAIGEGAFFETT@YAHOO.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.**