	State of Rhode Island and F Office of the Secre				
HOPE	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 Co	ertificate of Nor	n-Existence)		
ID	ENTITY NAME	(CERTIFICATE TYPE		
000094588	VALENTI'S OF WESTERLY, INC.		Good Standing Certificate		
000484949	VALENTI SUBARU, INC.		Good Standing Certificate		
Filer's Contact Informa					
•	nailing address and email.)				
Contact Name: WILLI					
Business Name: VALEN					
No. and Street: <u>6 LANC</u> City or Town: WESTE		State: RI	Zip: 02891	Country: USA	
Contact Phone: (401) 322-7200 ext:					
	DWIN@VALENTITOYOTA.CO	ОМ			
	il address to receive an expedite		rom us if the fili	ing is rejected	
for any reason. If no email address is provided, we will respond by mail.					
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