



**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
001665423	Capital Cove Development LLC	Long Form Good Standing
001665423	Capital Cove Development LLC	Long Form Good Standing

Total Fee: \$62.00

Filer's Contact Information

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

Contact Name: MAURA MURPHY

Business Name: RACKEMANN, SAWYER & BREWSTER

No. and Street: 160 FEDERAL STREET, 15TH FLOOR

City or Town: BOSTON

State: MA Zip: 02110

Country: USA

Contact Phone: (617) 951-1189 ext:

Contact Email: MMURPHY@RACKEMANN.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.