



**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
000552017	Legendary Inns of Newport, Inc.	Good Standing Certificate

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: NANCY STAFFORD

Business Name: LEGENDARY INNS OF NEWPORT, INC.

No. and Street: DBA CLIFFSIDE INN  
2 SEAVIEW AVE

City or Town: NEWPORT

State: RI

Zip: 02840

Country: USA

Contact Phone: (401) 847-1811 ext:

Contact Email: NANCY@CLIFFSIDEINN.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.**