



**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
000795880	RESHAN, INC.	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

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

Contact Name: JOSEPH A. LAMAGNA

Business Name: LAMAGNA LAW OFFICE

No. and Street: 2417 MENDON ROAD

City or Town: WOONSOCKET

State: RI

Zip: 02895

Country: USA

Contact Phone: (401) 724-6700 ext:

Contact Email: JOSEPHLAMAGNA@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.