s	State of Rhode Island and Providence Plantations Office of the Secretary of State			
HOPE	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040			
Certificate Request F	orm			
Request Information (Er	ntity Name is only required for a	a Certificate of N	on-Existence)	
ID	ENTITY NAME		CERTIFICATE TYPE	
001670999	Kings Coat, LLC		Good Standing Certificate	
Filer's Contact Informati (Enter a contact name, ma	iling address and email.)			
Contact Name: MIKE LI				
Business Name: <u>KINGS (</u>				
No. and Street:1536 TECity or Town:EXETERContact Phone:4016992	<u>390</u> ext:	State: <u>RI</u>	Zip: <u>02822</u>	Country: <u>USA</u>
Contact Email: <u>DERRECKLINDBERG@YAHOO.COM</u> 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.				
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