	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	
HOPE		
Certificate Request Form		
Request Information (Entity Name is only required for a Certificate of Non-Existence)		
ID	ENTITY NAME	CERTIFICATE TYPE
000160776	MM HOME DEPOT, L.L.C.	Good Standing Certificate
Filer's Contact Information		
(Enter a contact mormation) (Enter a contact name, mailing address and email.)		
Contact Name: <u>AUDREY MICHASIOW</u>		
Business Name: GOLDMAN ATTORNEYS PLLC		
No. and Street: 210 WASHINGTON AVENUE EXTENSION		
City or Town: <u>ALBANY</u> State: <u>NY</u> Zip: <u>12203</u> Country: <u>USA</u>		
Contact Phone: (518) 431-0941 ext:		
Contact Email: <u>AMICHASIOW@GOLDMANPLLC.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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