



**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
001661675	Cambriane LLC	Long Form Good Standing

Total Fee: \$32.00

Filer's Contact Information

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

Contact Name: DANIEL LEE

Business Name: CAMBRIANE GROUP LLC

No. and Street: 47 WOOD RIVER LANE

City or Town: WEST GREENWICH State: RI Zip: 02817 Country: USA

Contact Phone: (401) 397-6927 ext:

Contact Email: CAMBRIANE2@COX.NET

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.