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

ID	ENTITY NAME	CERTIFICATE TYPE
000107481	Nicaragua Covenant, Inc.	Certificate of Fact - Name Change

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: William P. Aldrich
Business Name:
No. and Street: 42 Gaspee Point Drive
City or Town: Warwick State: RI Zip: 02888 Country: USA
Contact Phone: 401-785-1596 ext: n/a
Contact Email: wpaldrich@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.