



**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
001340877	Legacy Management, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Mark R. Gordon

Business Name: Legacy Management, LLC

No. and Street: 32 Post Rd

City or Town: Westerly

State: RI

Zip: 02891

Country: USA

Contact Phone: 4014506384 ext:

Contact Email: legacymgmt@gmail.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.**