



**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
000146528	CSH, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: chris hoinsky

Business Name: mainstreet pizza cshllc

No. and Street: 229 mainstreet

City or Town: ashaway

State: RI

Zip: 02804

Country: USA

Contact Phone: 8608575301 ext:

Contact Email: chris06355@yahoo.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.