



**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
000936481	The Moped Man, Inc.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Willis N Brown, Jr

Business Name: The Moped Man, INC

No. and Street: po box 466  
435 Water Street

City or Town: Block Island State: RI Zip: 02807 Country: USA

Contact Phone: 281-736-8759 ext:

Contact Email: urascalu6@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.**