

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
001674642	Smith Street Convenience LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Joseph A Lamagna</u>
Business Name: <u>Lamagna Law Office</u>
No. and Street: <u>2417 Mendon Road</u>

City or Town: Woonsocket State: RI Zip: 02895 Country: USA

 $\begin{array}{lll} \mbox{Contact Phone:} & \underline{401.724.6700} & \mbox{ext:} & \underline{10} \\ \mbox{Contact Email:} & \underline{josephlamagna@yahoo.com} \end{array}$

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.

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