



**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
000142429	Beach Condo Tiverton, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: gregory P. Spier

Business Name:

No. and Street: 39 Prospect Street  
United States

City or Town: Foxboro State: MA Zip: 02035 Country: USA

Contact Phone: 5083287848 ext: 1

Contact Email: g.spier@verizon.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.**