



**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
000539489	89 AQUIDNECK AVENUE, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Carol E Saccucci

Business Name: Carol E. Saccucci, Esquire

No. and Street: 1350 West Main Road

City or Town: Middletown

State: RI

Zip: 02842

Country: USA

Contact Phone: 4018474737 ext:

Contact Email: carol@saccucci.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.**