



**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
001335431	NEWPORT CYCLING LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: sheila a hayes

Business Name: Newport Cycling LLC

No. and Street: 11 Daniel street

City or Town: NEWPORT

State: RI

Zip: 02840

Country: USA

Contact Phone: 4018494154 ext:

Contact Email: claire.eb@cox.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.