



**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
000937909	CV SOUTH STREET LANDING LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Kristin Ashley

Business Name: Ventas, Inc.

No. and Street: 500 NORTH HURSTBOURNE PARKWAY  
SUITE 200

City or Town: LOUISVILLE

State: KY Zip: 40222

Country: USA

Contact Phone: 5023579062 ext:

Contact Email: kashley@ventasreit.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.**