



**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
000506157	MALBEN, LLC	Certificate of Good Standing - Long Form

**Filer's Contact Information**

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

Contact Name: Christopher J. Ryan, Esq.

Business Name: Ryan Law Office

No. and Street: 181 Main Street

City or Town: Blackstone

State: MA

Zip: 01504

Country: USA

Contact Phone: 5088836000 ext:

Contact Email: chrisryan@ryanlawoffice.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.**