	State of Rhode Island and Providence Plantations Office of the Secretary of State	
148 Provide		iness Services ver Street 02904-2615 2-3040
Certificate Request F	Form	
Request Information		
ID	ENTITY NAME	CERTIFICATE TYPE
000911172	BELLA VISTA GROUP LLC	Certificate of Good Standing
Filer's Contact Information (Enter a contact name, mark Contact Name: <u>Anthony</u> Business Name: No. and Street: <u>155 Sou</u>	ailing address and email.) / J Bucci Jr	
City or Town: <u>Provide</u> Contact Phone: 401-83		ate: \underline{RI} Zip: $\underline{02903}$ Country: \underline{USA}
Contact Email: <u>abucci@buccilaw.com</u> 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.		
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