



**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
000911732	BRANCH AVENUE PLAZA, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Debora Burns

Business Name: ROGIN NASSAU LLC

No. and Street: 185 ASYLUM STREET  
22ND FLOOR

City or Town: HARTFORD

State: CT

Zip: 06103

Country: USA

Contact Phone: 8602566300 ext:

Contact Email: DBURNS@ROGINLAW.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.**