



**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
001019748	Lutz Morris LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Justin Morris

Business Name: Lutz Morris LLC

No. and Street: 620 Moonstone Beach Road

City or Town: Wakefield

State: RI

Zip: 02879

Country: USA

Contact Phone: 917-647-1052 ext:

Contact Email: justin@lutzmorris.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.**