

## 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
001669635	Emerald Leaf Organics LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <u>Alexander Wagner</u>

Business Name: Emerald Leaf Organics LLC

No. and Street: 15 Industrial Road

City or Town: <u>Cranston</u> State: <u>RI</u> Zip: <u>02920</u> Country: <u>USA</u>

 $\begin{array}{lll} \mbox{Contact Phone:} & \underline{9782046629} & \mbox{ext:} \\ \mbox{Contact Email:} & \underline{wags@elorganics.com} \end{array}$ 

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