

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
000159440	SEAPORT GRILLE & RAW BAR, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: William J Collins

Business Name: The Port

No. and Street: 359 Thames St Unit LC1

City or Town: Newport State: RI Zip: 02840 Country: USA

Contact Phone: $\underline{401\text{-}862\text{-}0500}$ ext: Contact Email: $\underline{\text{collins}6891@cox.net}$

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