

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
001680088	Easton Pool & Spa, Inc.	Certificate of Status - Revoked

Filer's Contact Information

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

Contact Name: Amy Sapovits

Business Name: <u>EASTON POOL & SPA INC</u>

No. and Street: 736 R Washington Street

City or Town: South Easton State: MA Zip: 02375 Country: USA

 $\begin{array}{lll} \mbox{Contact Phone:} & \underline{5082389698} & \mbox{ext:} \\ \mbox{Contact Email:} & \underline{amy@eastonpool.com} \end{array}$

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