



**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
001675148	RISSPORT II, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Nicole M. Jackson

Business Name:

No. and Street: 450 Veterans Memorial Pkwy, Suite 7A

City or Town: East Providence

State: RI

Zip: 02914

Country: USA

Contact Phone: 401-274-9100 ext: 230

Contact Email: nmj@pilgrimtitle.com