



**State of Rhode Island
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
000809283	54 MORTON AVENUE, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Bonnie Livingstone-Davis

Business Name:

No. and Street: 25 Summer Street

City or Town: Marblehead

State: MA

Zip: 01945

Country: USA

Contact Phone: 4018550636 ext:

Contact Email: 54mortonave@gmail.com