

## 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
000486177	ST. JAMES INVESTORS LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: Jossetti A Finamore

Business Name:

No. and Street: P.O. Box 10009

City or Town:  $\underline{Cranston}$  State:  $\underline{RI}$  Zip:  $\underline{02910}$  Country:  $\underline{USA}$ 

Contact Phone: <u>401-437-8888</u> ext: Contact Email: <u>nedstevens@outlook.com</u>

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