

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
000093867	WEEKAPAUG GOLF CLUB	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: John M Tosone

Business Name: Weekapaug Golf Club

No. and Street: 265 Shore Road

City or Town: WESTERLY State: RI Zip: 02891 Country: USA

Contact Phone: $\frac{4013227870}{\text{jtosone@pga.com}}$ ext:

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