

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
000065577	Avatar Residential, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: BARRY

Business Name: <u>barry shuster group llc</u>

No. and Street: po box 79578

City or Town: <u>dartmouth</u> State: <u>MA</u> Zip: <u>02747</u> Country: <u>USA</u>

Contact Phone: $\underline{15085580440}$ ext:

Contact Email: <u>UCCLIEN@RCN.COM</u>

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