



**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 |
|-----------|--------------------------------------------------|------------------------------|
| 000064127 | NEWPORT PLAYHOUSE and CABARET RESTAURANT INC. | Certificate of Good Standing |

Filer's Contact Information

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

Contact Name: Jonathan Perry

Business Name:

No. and Street: PO Box 451

City or Town: Newport

State: RI

Zip: 02840

Country: USA

Contact Phone: 4018487529 ext:

Contact Email: audrey@newportplayhouse.com