

## 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
000027785	GARFIELD SOCIAL CLUB	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <u>Myles Tingley</u>

Business Name:

No. and Street: 11 Hunt Street

City or Town:  $\underline{\text{Central Falls}}$  State:  $\underline{\text{RI}}$  Zip:  $\underline{02863}$  Country:  $\underline{\text{USA}}$ 

Contact Phone: ext:

Contact Email: garfieldsocialclub@outlook.com

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