

## 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
000797122	METROPOLITAN HOLDINGS, LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: TAMMY

Business Name: JOHN E. SHEKARCHI, ESQUIRE

No. and Street: 132 OLD RIVER ROAD

SUITE 103

City or Town: <u>LINCOLN</u> State: <u>RI</u> Zip: <u>02865</u> Country: <u>USA</u>

Contact Phone: <u>4017223600</u> ext:

 ${\color{red} \textbf{Contact Email:}} \quad \underline{\textbf{OFFICE@SHEKLAWFIRM.COM}}$ 

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