



**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
000106738	M.S.S. Corporation	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Anthony Rosciti

Business Name:

No. and Street: po box 19120

City or Town: Johnston State: RI Zip: 02919 Country: USA

Contact Phone: 4013516681 ext:

Contact Email: Melissad@rosciti.com