



**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
001689432	Cliffside Inn LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Charles Hajjar

Business Name: Cliffside Inn LLC

No. and Street: 30 Adams Street

City or Town: Milton

State: MA

Zip: 02186

Country: USA

Contact Phone: 6177947348 ext:

Contact Email: Ellen@larkhotels.com