



**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
001715060	Green Wave CC, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Christopher Sands

Business Name: Green Wave CC

No. and Street: 771 Post Rd

City or Town: Wakefield

State: RI

Zip: 02879

Country: USA

Contact Phone: 4019327263 ext:

Contact Email: sandschris@hotmail.com