

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
000507275	VISTA REALTY GROUP, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Michael Levinson</u>

Business Name: <u>Brainsky Levinson LLC</u>
No. and Street: <u>1543 FALL RIVER AVE</u>

STE 1

City or Town: <u>SEEKONK</u> State: <u>MA</u> Zip: <u>02771</u> Country: <u>USA</u>

Contact Phone: <u>5085571910</u> ext:

Contact Email: Kfortin@brainskylevinson.com

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