

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
000081712	MOON ASSOCIATES, INC.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>James Moon</u>

Business Name: Moon Associates Inc.

No. and Street: 48 Paine Rd.

City or Town: <u>Cumberland</u> State: <u>RI</u> Zip: <u>02864</u> Country: <u>USA</u>

Contact Phone: 4015782280 ext:

Contact Email: <u>moonassociates@aol.com</u>

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