



**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
001720223	Card Crazy LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Jason Smith

Business Name: Card Crazy LLC

No. and Street: 165 Sayles Hill Rd

City or Town: North Smithfield

State: RI

Zip: 02896

Country: USA

Contact Phone: 4013093947 ext:

Contact Email: Jsmith199555@yahoo.com