

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
000547221	3844 POST ROAD, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Stephanie G Robert, ACP</u>
Business Name: <u>Revens, Revens & St. Pierre</u>

No. and Street: 946 Centerville Road

City or Town: Warwick State: RI Zip: 02886 Country: USA

 $\begin{array}{lll} \mbox{Contact Phone:} & \underline{4018222900} & \mbox{ext:} \\ \mbox{Contact Email:} & \underline{\mbox{jcrasst1@rrsplaw.com}} \end{array}$

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