



**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
000049916	V.S. HASEOTES & SONS LIMITED PARTNERSHIP	Certificate of Legal Existence - Long Form

**Filer's Contact Information**

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

Contact Name: Gary Alger

Business Name:

No. and Street: PO Box 8000

City or Town: Cumberland

State: RI

Zip: 02864

Country: USA

Contact Phone: 4013834000 ext:

Contact Email: GARYALGER@LAWYER.COM