



**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
001722675	SB Newport RI, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Karen Augeri Benson, Esq.

Business Name:

No. and Street: 226 S MAIN ST STE 6

City or Town: FALL RIVER

State: MA

Zip: 02721-5302 Country: USA

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