



**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
001723423	CCI Facility Contractors, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Sherry Roberts

Business Name: CCI

No. and Street: 111 W 16th Ave, STE 201

City or Town: Anchorage

State: AK

Zip: 99501

Country: USA

Contact Phone: 9077939219 ext:

Contact Email: cci.tax@bbsllc.com