



**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
000126287	NFM, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Stephanie Paull

Business Name: NFM, Inc.

No. and Street: 1190 Winterson Road, Suite 300

City or Town: Linthicum

State: MD

Zip: 21090

Country: USA

Contact Phone: 443-451-3479 ext:

Contact Email: spaul@nfmlending.com