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
000118642	MMRR, LLC	Certificate of Good Standing
000118642	MMRR, LLC	Certificate of Fact - Name Change

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Taylor Dolan
Business Name: Lee/Shoemaker PLLC
No. and Street: 1400 I Street, NW
200
City or Town: Washington State: DC Zip: 20005 Country: USA
Contact Phone: 2029719400 ext:
Contact Email: mer@leeshoemaker.com