



**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
001672916	NEWPORT HOWARD, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Samuel M. Sherry

Business Name: Samuel M. Sherry, Esq. PA

No. and Street: PO Box 7875

City or Town: Portland

State: ME

Zip: 04112

Country: USA

Contact Phone: 2077998485 ext:

Contact Email: Sam@FineAttorney.com