



**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
001679803	Hope Artiste Residential Master Tenant LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Taylor Lolva

Business Name:

No. and Street: 25 robert pitt drive

City or Town: monsey

State: NY

Zip: 10952

Country: USA

Contact Phone: ext:

Contact Email: taylor@vcorpservices.com