



**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
000005284	MALIK'S LIQUOR, INC.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Anna Znosko

Business Name: Farmer & First CPA's

No. and Street: 6 State Street

City or Town: Warren

State: RI

Zip: 02885

Country: USA

Contact Phone: 401-247-1040 ext: 114

Contact Email: anna@farmerfirstcpas.com