



**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             |
|-----------|---------------|------------------------------|
| 001056037 | WANDERER, LLC | Certificate of Good Standing |

**Filer's Contact Information**

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

Contact Name: julie kozak

Business Name:

No. and Street: 54R High street

City or Town: westerly

State: RI

Zip: 02891

Country: USA

Contact Phone: 4013155737 ext:

Contact Email: julie@shallowsbar.com