



**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
001725045	Swell n' Good LLC	Certificate of Fact - Name Change

**Filer's Contact Information**

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

Contact Name: Kelsey Heston

Business Name: Swell n' Good LLC

No. and Street: 33 Seafare Lane

City or Town: Portsmouth

State: RI

Zip: 02871

Country: USA

Contact Phone: 8029993931 ext:

Contact Email: drkelsey@swellngood.com