



**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
001664471	Springbrook Condominium Association	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: frank lombardi

Business Name: lombardi law group, llc

No. and Street: 14 Breakneck hill road  
suite 203

City or Town: lincoln

State: RI

Zip: 02865

Country: USA

Contact Phone: 4019990115 ext:

Contact Email: renee@llgri.com