



**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
001729392	44 Gilmore Street, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Bazl Taliaferrow-Mosleh

Business Name:

No. and Street: 15 Josephine Ave

City or Town: Rumford State: RI Zip: 02916 Country: USA

Contact Phone: 646-812-4912 ext:

Contact Email: bazltaliaferrow@gmail.com