



**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
001690565	SUAVE ATHLETICS LLC	Certificate of Good Standing - Long Form

Filer's Contact Information

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

Contact Name: ANTHONY W. CONCEPCION

Business Name:

No. and Street: 3115 NE 184TH ST APT 4303

City or Town: AVVENTURA State: FL Zip: 33160 Country: USA

Contact Phone: 508-250-8568 ext:

Contact Email: SUAVEATHLETICS@ICLOUD.COM