

## 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
000003715	CARR'S GARAGE, INC.	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <u>JASON F MOITOSO</u> Business Name: <u>Carrs Garage Inc</u>

No. and Street: 396 Broad St

City or Town: <u>Cumberland</u> State: <u>RI</u> Zip: <u>02864</u> Country: <u>USA</u>

Contact Phone:  $\underline{4017255261}$  ext:

Contact Email: <a href="mailto:carrsgarage@gmail.com">carrsgarage@gmail.com</a>

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