



**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
001668552	KAM, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Clifford M. Freeman, Esquire

Business Name: Freeman & Freeman

No. and Street: 7 Harvard Street
Suite 230

City or Town: Brookline

State: MA

Zip: 02445-7979 Country: USA

Contact Phone: 6177344500 ext:

Contact Email: clifford@freemanandfreeman.net