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
001733167	GSI Hope Valley 1115 Main Street, LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Karen Elliott
Business Name:
No. and Street: PO BOX 1831
City or Town: Austin State: TX Zip: 78767 Country: USA
Contact Phone: ext:
Contact Email: kelliott@capitolservices.com

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