

## 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
000112438	Salvation Cafe, Inc.	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <a href="mailto:susan Lamond">susan Lamond</a>
Business Name: <a href="mailto:Salvation Cafe Inc.">Salvation Cafe Inc.</a>
No. and Street: <a href="mailto:140 Broadway">140 Broadway</a>

City or Town: Newport State: RI Zip: 02840 Country: USA

 $\begin{array}{lll} \mbox{Contact Phone:} & \underline{4018472620} & \mbox{ext:} \\ \mbox{Contact Email:} & \underline{stlamond@gmail.com} \end{array}$ 

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