



**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
001728992	High 5 Kitchen, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Donna L Paiva-Galloway

Business Name:

No. and Street: 2 Stoney Hill Cir

City or Town: Coventry

State: RI

Zip: 02816

Country: USA

Contact Phone: 4013686825 ext:

Contact Email: High5vfw@gmail.com