



**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
000030163	THE TOMAQUAG INDIAN MEMORIAL MUSEUM	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Lorén Spears

Business Name: Tomaquag Indian Memorial Museum, the

No. and Street: 390 A Summit Road

City or Town: Exeter

State: RI

Zip: 02822

Country: USA

Contact Phone: 401-491-9063 ext:

Contact Email: Lorenspears@tomaquagmuseum.org