



**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
000235381	CHAPEL HOTEL, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Priscilla West

Business Name: Chapel Hotel LLC

No. and Street: PO Box
2516

City or Town: Fall River

State: MA

Zip: 02722

Country: USA

Contact Phone: 5086791180 ext:

Contact Email: Priscilla@FirstBristol.com