

## 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
001744932	Mountaindale Movers, LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <u>ERIC HOOD</u>

Business Name:

No. and Street:  $\underline{115\ N\ Calhoun\ St,\ Ste\ 4}$ 

City or Town: <u>Tallahassee</u> State: <u>FL</u> Zip: <u>32301</u> Country: <u>USA</u>

Contact Phone: <u>8666250838</u> ext:

Contact Email: jbialowas@cogencyglobal.com

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