



**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
000146528	CSH, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: chris hoinsky

Business Name: Mainstreet Pizza

No. and Street: 229 Mainstreet

City or Town: Ashaway

State: RI

Zip: 02804

Country: USA

Contact Phone: 8608575301 ext:

Contact Email: chris06355@yahoo.com