

## 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     | Y NAME CERTIFICATE TYPE                                |  |
|--------|------------|--|--|
| 001714 | Lumiere Ve | /entures, LLC Certificate of Good Standing - Long Form |  |

## **Filer's Contact Information**

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

Contact Name: <u>Lynette Herr</u>

Business Name:

No. and Street: 20 Second Ave.

<u>Unit 213</u>

City or Town:  $\underline{\text{Burlington}}$  State:  $\underline{\text{MA}}$  Zip:  $\underline{\text{01803}}$  Country:  $\underline{\text{USA}}$ 

Contact Phone: <u>512-704-2592</u> ext: Contact Email: <u>lynherr16@gmail.com</u>

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