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
001672403	N Maple LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Duo Neil
Business Name: N Maple LLC
No. and Street: PO Box 610152
City or Town: Newton State: MA Zip: 02461 Country: USA
Contact Phone: 4016019221 ext:
Contact Email: duoneil2016@gmail.com