



**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
000967713	ARCP SS NORTH KINGSTOWN RI, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: NANCY LOCKHART

Business Name: BUCHALTER

No. and Street: 18400 VON KARMAN AVE, SUITE 800

City or Town: IRVINE

State: CA Zip: 92612 Country: USA

Contact Phone: 2138915612 ext:

Contact Email: NLOCKHART@BUCHALTER.COM