

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
000151227	C&M LLC	Certificate of Good Standing - Long Form

Filer's Contact Information

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

Contact Name: michael deffley

Business Name:

No. and Street: 2158 Plainfield Pike

Suite 9

City or Town: $\underline{Cranston}$ State: \underline{RI} Zip: $\underline{02921}$ Country: \underline{USA}

Contact Phone: <u>401-527-8817</u> ext: Contact Email: <u>mike@alliance911.net</u>

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