

## 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	EN	TITY NAME	CERTIFICATE TYPE
0017027	720 Clear Fa	lls Valuations, LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: Connie Carlson

 $\hbox{\tt Business Name:} \underline{Clear\ Falls\ Valuations,\ LLC}$ 

No. and Street: 1177 West Loop South, Suite 610

City or Town: Houston State: TX Zip: 77027 Country: USA

Contact Phone: ext:

Contact Email: licensing@houseloan.com

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