



**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
001081155	184 SHORE ROAD, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Nicholas R. Scola

Business Name:

No. and Street: 286 Main Street

City or Town: Danielson

State: CT

Zip: 06239

Country: USA

Contact Phone: ext:

Contact Email: nscola@closingcentral.com