



**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
000116658	Subsidized Properties IV, L.P.	Certificate of Legal Existence

**Filer's Contact Information**

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

Contact Name: David Harmon

Business Name: FATIC

No. and Street: 901 S 2nd Street  
201

City or Town: Springfield

State: IL

Zip: 62704

Country: USA

Contact Phone: ext:

Contact Email: alpeterson@firstam.com