

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
000089572	COVE HOMES INCORPORATED	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Tracy Johnson</u>
Business Name: <u>Cove Homes, Inc</u>
No. and Street: <u>146 First Avenue</u>

City or Town: <u>East Greenwich</u> State: <u>RI</u> Zip: <u>02818</u> Country: <u>USA</u>

Contact Phone: $\underline{4018852610}$ ext: $\underline{13}$ Contact Email: $\underline{tjohnson@eghousing.com}$

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