



**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
001707513	Carp 1 LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Domenic Carpionato

Business Name:

No. and Street: 433 South Main Street
Suite 219

City or Town: West Hartford

State: CT

Zip: 06110

Country: USA

Contact Phone: ext:

Contact Email: hillary.peters@outlook.com