

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
000135165	FULL SAIL MANAGEMENT, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Steven Kirkpatrick

 $\label{eq:Business Name: Full Sail Management, LLC} \\ \text{No. and Street: } \underline{161 \; Frank \; Coelho \; Drive}$

City or Town: Portsmouth State: RI Zip: 02871 Country: USA

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