

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
000525654	CITY POINT PARTNERS LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Adrian Rancel

 $\label{eq:cogency Global Inc.} \begin{tabular}{l} Business Name: $$\underline{Cogency \ Global \ Inc.}$ \\ No. and Street: $$\underline{45 \ SCHOOL \ ST.}$ \\ \end{tabular}$

<u>Suite 202</u>

City or Town: BOSTON State: MA Zip: 02108-3206 Country: USA

Contact Phone: <u>8572633013</u> ext:

Contact Email: arancel@cogencyglobal.com

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