

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
001758952	Passion Pathways LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>HOPEROSE ORTIZ</u>
Business Name: <u>Passion Pathways LLC</u>
No. and Street: <u>32 CAVALCADE BLVD</u>

City or Town: WARWICK State: RI Zip: 02889 Country: USA

Contact Phone: ext:

Contact Email: filing@registrationfast.com

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