



**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
001729743	THREE FINGER REMODELING LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Kimberly Lindopp

Business Name: Lepizzera & Laprocina

No. and Street: 117 Metro Center Blvd., Suite 2001

City or Town: Warwick

State: RI

Zip: 02886

Country: USA

Contact Phone: 4017397397 ext:

Contact Email: KLindopp@LepLap.com