

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
001721347	TIDEWATER STADIUM, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Kathleen J Paul

Business Name: $\underline{\text{Duffy \& Sweeney, LTD}}$

No. and Street: 321 South Main Street, Suite 400

City or Town: Providence State: RI Zip: 02903 Country: USA

Contact Phone: <u>401-480-0222</u> ext:

Contact Email: kpaul@duffysweeney.com

© 2007 - 2023 State of Rhode Island All Rights Reserved