

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
000519613	HOMETOWN DINER LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Raymond DeLeo

 ${\tt Business\ Name:} \underline{Gooding\ Realty\ Corporation}$

No. and Street: PO Box 343

City or Town: Bristol State: RI Zip: 02809-0343 Country: USA

Contact Phone: <u>4012533190</u> ext:

Contact Email: RLion@gooding.necoxmail.com

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