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
001761700	Pro Poker Box LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Kyle Anderson
Business Name: Pro Poker Box
No. and Street: 50 Douglas Cir
City or Town: Greenville State: RI Zip: 02828 Country: USA
Contact Phone: 4016780773 ext:
Contact Email: Kyle@propokerbox.com