

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	Y NAME CERTIFICATE TYPE
000111	619 Sakonnet Auto	o Service, Inc. Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>James F Towers</u>

Business Name: <u>Towers and Company</u>

No. and Street: 422 Mariano Bishop Blvd

City or Town: Fall River State: MA Zip: 02721 Country: USA

Contact Phone: <u>4016242840</u> ext: Contact Email: <u>jim@towacc.com</u>

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