



**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
001710044	CHRISTOPHER LYONS, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: CHRISTOPHER LYONS

Business Name: CHRISTOPHER LYONS LLC

No. and Street: PO BOX 582

City or Town: WAKEFIELD

State: RI

Zip: 02880

Country: USA

Contact Phone: 401-524-8130 ext:

Contact Email: lab@cm-cpas.com