



**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
001765299	SYTREEOFLIFE, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Paul Morse

Business Name:

No. and Street: 914 Bay Colony Drive South

City or Town: Juno Beach

State: FL

Zip: 33408

Country: USA

Contact Phone: 4014747150 ext:

Contact Email: pmorse22@gmail.com