



**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
001754688	Wicked Wings RI LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Christopher Hernandez

Business Name: Wicked Wings RI LLC

No. and Street: 20 mohawk trail

City or Town: cranston

State: RI

Zip: 02921

Country: USA

Contact Phone: 401-871-4510 ext:

Contact Email: wickedwingsri@gmail.com