

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
000	0728089	THE BRAZEN HEN, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>LEO ROCHE</u>

 ${\tt Business\ Name:} \underline{\tt THE\ BRAZEN\ HEN\ LLC}$

No. and Street: $\underline{4 \ CANAL \ STREET}$

City or Town: WESTERLY State: RI Zip: 02891 Country: USA

Contact Phone: <u>860-705-3846</u> ext:

Contact Email: HARPANDHOUND@YAHOO.COM

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