



**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
000084101	CENTRAL FALLS AFFORDABLE HOUSING CORPORATION	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: JOSEPH A LAMAGNA

Business Name:

No. and Street: 2417 MENDON ROAD

City or Town: WOONSOCKET

State: RI

Zip: 02895

Country: USA

Contact Phone: 401724-6700 ext: 10

Contact Email: josephlamagna@yahoo.com