



**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
001726932	4 Brothers Professional Services Llc	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: SAGRARIO VILLANUEVA

Business Name:

No. and Street: 7001 VILLAGE DRIVE

City or Town: BUENA PARK

State: CA

Zip: 90621

Country: USA

Contact Phone: 13233090426 ext:

Contact Email: Svillanueva@riamoneytransfer.com