

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
001754715	Salty Pine Co LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Tara Abbascia</u>
Business Name: <u>Salty Pine Co LLC</u>
No. and Street: <u>76 Dudley Rd.</u>

<u>1R</u>

City or Town: \underline{Oxford} State: \underline{MA} Zip: $\underline{01540}$ Country: \underline{USA}

Contact Phone: <u>4789609554</u> ext:

Contact Email: saltypineco@gmail.com

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