



**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
000029367	SOUTH COUNTY MUSEUM	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Lynn M Wagner

Business Name: South County Museum

No. and Street: PO Box 709

City or Town: Narragansett

State: RI

Zip: 02882

Country: USA

Contact Phone: 8608996090 ext:

Contact Email: lynn@southcountymuseum.org