



**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
000846834	CREDENCE RESOURCE MANAGEMENT, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Licensing Assistant

Business Name:

No. and Street: 3838 N. Causeway Blvd.  
Suite 2800

City or Town: Metairie State: LA Zip: 70002 Country: USA

Contact Phone: 5048283700 ext:

Contact Email: licensing@sessions.legal