

## 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	ENTI	ΓΥ NAME	CERTIFICATE TYPE	
001749	544 Hawks (	Quest II, LLC	Certificate of Good Standing	

## **Filer's Contact Information**

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

Contact Name: <u>Jeffrey Hawks</u>

Business Name:

No. and Street: 5380 Gulf of Mexico Dr

Suite 105, PMB 411

City or Town:  $\underline{\text{Longboat Key}}$  State:  $\underline{\text{FL}}$  Zip:  $\underline{\text{34228}}$  Country:  $\underline{\text{USA}}$ 

Contact Phone: <u>3036191514</u> ext:

Contact Email: kathy@hawksfamily.com

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