

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
001773537	Three Fish, LLC	Certificate of Good Standing

Filer's Contact Information

(Enter a contact name, mailing address and email.)
Contact Name: THOMAS J. LIGUORI, JR.

 ${\tt Business\ Name:} \underline{{\tt Urso\ Liguori\ Micklich}}$

No. and Street: <u>85 Beach Street</u>

Bldg. C

City or Town: Westerly State: \underline{RI} Zip: $\underline{02891}$ Country: \underline{USA}

Contact Phone: 4015967751 ext:

Contact Email: tomliguori@ulmlawfirm.com

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