



**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
001773714	Say Less LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Mallory Pickard

Business Name:

No. and Street: 62 Scituate Farms Drive

City or Town: Cranston

State: RI

Zip: 02921

Country: USA

Contact Phone: 6144412554 ext:

Contact Email: mallorypickard1@gmail.com