



**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
001774078	True Story Publishing, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Susan Galinelli

Business Name: True Story Publishing, LLC

No. and Street: 38 Orchard Meadows Drive

City or Town: Smithfield

State: RI

Zip: 02917

Country: USA

Contact Phone: 401-480-7450 ext:

Contact Email: susanaustin086@gmail.com