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
001771435	Revitasurance LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Samuele Loverdi
Business Name: Revitasurance LLC
No. and Street: 251 Tiogue Ave
City or Town: Coventry State: RI Zip: 02816 Country: USA
Contact Phone: 4013009414 ext:
Contact Email: Samloverdi@gmail.com