

## 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
000161287	JASMINE SEVEN, LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: Ann Malik

 $\label{eq:business Name: Jasmine Seven LLC} \\ \text{No. and Street: } \underline{6 \text{ Stone Tower Ln}} \\$ 

City or Town: Barrington State: RI Zip: 02806 Country: USA

Contact Phone: ext:

Contact Email: ann@jasmineseven.com

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