



**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
000138505	BLOCK ISLAND FERRY SERVICES LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Kim M. Larensen

Business Name: TCORS

No. and Street: 43 Broad Street

City or Town: New London

State: CT

Zip: 06320

Country: USA

Contact Phone: 860-447-0335 ext: 221

Contact Email: kmlarensen@tcors.com