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
000158094	MARCASSIN LLC	Certificate of Good Standing

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

Contact Name: jesse james
Business Name: Marcassin LLC
No. and Street: po box 932 483 hope st
City or Town: BRISTOL State: RI Zip: 02809 Country: USA
Contact Phone: 4013969965 ext:
Contact Email: info@lecentralbristol.net