

## 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
000052401	WAREHOUSE BEER WINE LIQUOR, INC.	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: RayeAnn Hammond

 ${\tt Business\ Name:} \underline{{\tt Warehouse\ Beer\ Wine\ Liquor\ Inc}}$ 

No. and Street:  $\frac{}{86}$  Franklin Street

City or Town: <u>WESTERLY</u> State: <u>RI</u> Zip: <u>02891</u> Country: <u>USA</u>

Contact Phone: <u>4012124030</u> ext:

Contact Email: accounting@thewinestoreri.com

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