

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
001722164	Carpe Noctem Restaurant, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Derek Savas</u>

Business Name: Carpe Noctem Restaurant LLC dba Fifth Element

No. and Street: PO Box 4340

City or Town: Middletown State: RIZip: 02842Country: USA

Contact Phone: <u>401-450-5089</u> ext: Contact Email: <u>Dereksavas@gmail.com</u>

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