

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
ĺ	001697745	LR electrical services corporation	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>CLEIDSON SILVA</u>

Business Name: $\underline{\text{CSEP INNOVATION INC}}$ No. and Street: $\underline{711 \text{ PLEASANT STREET}}$

City or Town: FALL RIVER State: MA Zip: 02723 Country: USA

Contact Phone: ext:

Contact Email: CSILVA@CSEPINNOVATION.COM

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