



**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
000064909	500 Angell Associates Limited Partnership	Certificate of Legal Existence

Filer's Contact Information

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

Contact Name: Holli Stott

Business Name:

No. and Street: 1 Park Row, 300

City or Town: Providence

State: RI

Zip: 02903

Country: USA

Contact Phone: 4014536400 ext:

Contact Email: hstott@crfllp.com