



**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
001731180	Riverview Operator LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Lindsay gates

Business Name: SPI

No. and Street: 28593 N Sky Crest Dr.
524 s2nd st

City or Town: Mundelein

State: IL

Zip: 60060

Country: USA

Contact Phone: 2142357398 ext:

Contact Email: ncoreas@spinationwide.com