

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
001778812	The Babyhood LLC	Certificate of Good Standing

Filer's Contact Information

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

 $\begin{array}{ll} \text{Contact Name: } \underline{Elsa} \\ \text{Business Name: } \underline{Daou} \end{array}$

No. and Street: 142 Elizabeth Avenue

City or Town: North Smithfield State: RI Zip: 02896 Country: USA

Contact Phone: <u>5084401584</u> ext: Contact Email: <u>Info@thebabyhood.co</u>

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