

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
001783667	Expect Xpress LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: $\frac{\text{William Thomas}}{\text{Expect Xpress}}$

No. and Street: 166 Valley st 6M Sprout Suite 103

City or Town: Providence State: RI Zip: 02909 Country: USA

Contact Phone: <u>8579280780</u> ext:

Contact Email: william.james02125@gmail.com

© 2007 - 2025 State of Rhode Island All Rights Reserved