

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
001730417	Greenvans LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Anthony Rovedo $\hbox{\tt Business Name:} \underline{Greenvans\ LLC}$ No. and Street: 100 Cummings Ctr

Ste 427C

Country: <u>USA</u> City or Town: Beverly State: <u>M A</u> Zip: <u>01915</u>

Contact Phone: ext:

Contact Email: anthony@rentgreenvans.com

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