



**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
000160569	SAMPSON APARTMENTS, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: adam rose

Business Name:

No. and Street: PO box 6662

City or Town: providence

State: RI

Zip: 02940

Country: USA

Contact Phone: 401-722-2228 ext:

Contact Email: adam@ajroselaw.com