



**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
001726677	Source Hub	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Fernanda Silveira

Business Name:

No. and Street: 357 South Main St

City or Town: Fall River

State: MA Zip: 02721

Country: USA

Contact Phone: ext:

Contact Email: fsilveira@sourcehub.us