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
001686232	KL Restaurant Inc.	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Charlene Dickie
Business Name: Marshall & Associates LLC
No. and Street: 655 Mendon Road
City or Town: Cumberland State: RI Zip: 02864 Country: USA
Contact Phone: 401-727-4100 ext:
Contact Email: closings@marshall-associatesri.com