



**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
001785265	LOS ANDES MINIMARKET INC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Sagrario Villanueva

Business Name:

No. and Street: Sagrario Villanueva

City or Town: Los Angeles

State: CA

Zip: 90621

Country: USA

Contact Phone: 5623452100 ext:

Contact Email: akfernandez@riamoneytransfer.com