

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
000093868	QUITO'S SHELLFISH AND RESTAURANT, INC.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: ALBERT QUITO

Business Name: QUITO'S SHELLFISH AND RESTAURANT, INC.

No. and Street: PO BOX 204

City or Town: <u>BRISTOL</u> State: <u>RI</u>Zip: <u>02809</u>Country: <u>USA</u>

Contact Phone: <u>4016838550</u> ext: Contact Email: <u>alquito@live.com</u>

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