

## 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
000164994	DEVDEVIO, LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: Kimberly Bryant

Business Name:  $\underline{\text{Dickinson Wright PLLC}}$ No. and Street:  $\underline{300 \text{ West Vine Street}}$ 

Suite 1700

City or Town: <u>Lexington</u> State: <u>KY</u> Zip: <u>40507</u> Country: <u>USA</u>

Contact Phone: <u>8593964482</u> ext:

Contact Email: kbryant@dickinsonwright.com

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