



**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
001748027	Hawks Wing Innovation Group, LLC	Certificate of Status - Dissolved

Filer's Contact Information

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

Contact Name: Brooke Lawrence

Business Name:

No. and Street: 134 Sharpe St
Unit 4

City or Town: West Greenwich

State: RI

Zip: 02817

Country: USA

Contact Phone: 4016516972 ext:

Contact Email: blawrence@rimrc.org