



**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
000109638	Capital City Insurance Agency L.L.C.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Gregory Ayrassian

Business Name: Capital City Insurance Agency LLC

No. and Street: 870 Oaklawn Ave

City or Town: CRANSTON

State: RI

Zip: 02920

Country: USA

Contact Phone: 4014860266 ext:

Contact Email: ga@capcity-ins.com