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
001765502	FSW Citadel, LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Kathleen M Fontaine
Business Name:
No. and Street: 40946 US Hwy 19 N
Suite 438
City or Town: Tarpon Springs State: FL Zip: 34689 Country: USA
Contact Phone: 5083692550 ext:
Contact Email: kfont12416@gmail.com