

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
001708376	401HomeBuyers LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Anthony M Bettencourt

 ${\tt Business\ Name:} \underline{Compass\ Title\ \&\ Escrow,\ LTD}$

No. and Street: <u>6 Blackstone Valley Place</u>

Suite 109B

City or Town: <u>Lincoln</u> State: <u>RI</u> Zip: <u>02865</u> Country: <u>USA</u>

Contact Phone: ext:

 $Contact\ Email:\ \underline{abettencourt@compasste.com}$

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