

## 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
Γ	001733161	Cherry Blossom Realty Associates, LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: Paul Laprocina

Business Name: <u>Lepizzera & Laprocina</u>
No. and Street: <u>117 Metro Center Blvd</u>

Suite2001

City or Town:  $\underline{\text{Warwick}}$  State:  $\underline{\text{RI}}$  Zip:  $\underline{02886}$  Country:  $\underline{\text{USA}}$ 

Contact Phone: ext:

Contact Email: <a href="mailto:lholden@leplap.com">lholden@leplap.com</a>

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