



**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
001793607	Fruit Ferry LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Alexa Costa

Business Name: Marshall & Associates

No. and Street: 655 MENDON ROAD

City or Town: CUMBERLAND

State: RI Zip: 02864 Country: USA

Contact Phone: 401-727-4100 ext:

Contact Email: administration@marshall-associatesri.com