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
000108739	PORTSMOUTH PROPERTY MANAGEMENT L.L.C.	Certificate of Good Standing

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

Contact Name: Lisa Nocon
Business Name: Corcoran Peckham Hayes Leys & Olaynack PC
No. and Street: 43B Memorial Blvd
City or Town: Newport State: RI Zip: 02840 Country: USA
Contact Phone: 4018470872 ext:
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