

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
001794530	SWEET SIPS, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Danya Mailhot</u>
Business Name: <u>Sweet Sips</u>

No. and Street: $\underline{28\,FERNCREST\,BLVD}$

City or Town: North Providence State: RI Zip: 02911 Country: USA

Contact Phone: <u>4016409228</u> ext:

Contact Email: danyamailhot@gmail.com

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