



**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
001677622	Birch & Ivy LLC.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: MICHAEL R SHUSTER

Business Name:

No. and Street: 1037 Sands Pond Rd  
#1380

City or Town: New Shoreham State: RI Zip: 02807 Country: USA

Contact Phone: 4017876904 ext:

Contact Email: mshujmu@gmail.com