

## 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
001760379	Sally Rosen Managing Member, Official Fan Club, LLC	Certificate of Status - Non Resident Landlord

## **Filer's Contact Information**

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

Contact Name: Sally A Rosen

Business Name:

No. and Street: <u>163 Tresana Blvd</u>

**Unit 121** 

City or Town: <u>Jupiter</u> State: <u>FL</u> Zip: <u>33478</u> Country: <u>USA</u>

Contact Phone: ext:

Contact Email: ofcsally@gmail.com

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