

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
ſ	001731892	lakewood autobody corp	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>GEORGES MELHEM</u>

 ${\tt Business\ Name:} \underline{LAKEWOOD\ AUTOBODY\ CORP}$

No. and Street: $\underline{110~MAIN~AVE}$

City or Town: WARWICK State: RI Zip: 02888 Country: USA

Contact Phone: $\underline{4017810260}$ ext:

Contact Email: JACOBMELHEM@LIVE.COM

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