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
000084925	DOCKSIDE NORTH, LLC.	Certificate of Good Standing

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

Contact Name: THOMAS ABRUZESE
Business Name: DOCKSIDE NORTH LLC
No. and Street: 39 AGAR STREET
City or Town: YONKERS State: NY Zip: 10701 Country: USA
Contact Phone: 401-662-3455 ext:
Contact Email: thedeckoffice1@gmail.com