

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
001723407	Car Rentals RI Limited Liability Company	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Frank Rodriguez

 $\hbox{\tt Business Name:} \underline{CAR} \ \underline{RENTALS} \ \underline{RI} \ \underline{LLC}$

No. and Street: 21 Calef street

City or Town: <u>Cranston</u> State: <u>RI</u> Zip: <u>02920</u> Country: <u>USA</u>

Contact Phone: <u>4014994367</u> ext:

Contact Email: carrentalsri21@gmail.com

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