

## 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
001785448	St Cloud, LLC	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: Mark Maciel
Business Name: St Cloud, LLC

No. and Street:  $\underline{12525}$  Westfield Lakes Cir

City or Town: Winter Garden State: FL Zip: 34787 Country: USA

Contact Phone: ext:

Contact Email: mark@mmaciel.com

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