



**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
000029367	SOUTH COUNTY MUSEUM	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Lynn Wagner

Business Name:

No. and Street: 115 Strathmore St.

PO Box 709

City or Town: Narragansett

State: RI

Zip: 02882

Country: USA

Contact Phone: ext:

Contact Email: lynn@southcountymuseum.org