



State of Rhode Island and Providence Plantations  
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** (Entity Name is only required for a Certificate of Non-Existence)

ID	ENTITY NAME	CERTIFICATE TYPE
000083241	SynergyOne Solutions, Inc.	Certificate of Fact / Certificate of Amendment

**Total Fee: \$32.00**

**Filer's Contact Information**

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

Contact Name: ELLIOTT M. LOEW

Business Name: ELLIOTT M. LOEW, P.C.

No. and Street: 51 WINCHESTER STREET

SUITE 205

City or Town: NEWTON

State: MA

Zip: 02461

Country: USA

Contact Phone: (617) 969-2660 ext:

Contact Email: EMLPC@COMCAST.NET

**Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.**