

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
000142435	ZALO ONE, LLC	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

(Enter a contact name, mailing address and email.)
Contact Name: J. RUSSELL JACKSON
Rusings Name: IACKSON ONEILL LLC

Business Name: <u>JACKSON ONEILL LLC</u>
No. and Street: 26 VALLEY ROAD S 203

City or Town: $\underline{MIDDLETOWN}$ State: \underline{RI} Zip: $\underline{02842}$ Country: \underline{USA}

Contact Phone: 4018487979 ext:

Contact Email: ESB@JACKSONONEILL.COM

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.

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