



**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
000141769	BEARING DISTRIBUTORS, INC.	Good Standing Certificate

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: CHERYL ELKINS

Business Name: BDI

No. and Street: 8000 HUB PARKWAY

City or Town: CLEVELAND

State: OH

Zip: 44125

Country: USA

Contact Phone: (216) 642-9100 ext:

Contact Email: CELKINS@BDI-USA.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.**