



**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 |
|-----------|-----------------|---------------------------|
| 000123018 | Polaris Project | Good Standing Certificate |

Total Fee: \$7.00

Filer's Contact Information

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

Contact Name: KATHY PICKETT

Business Name: LABYRINTH, INC.

No. and Street: 841-F QUINCE ORCHARD BLVD.

City or Town: GAITHERSBURG State: MD Zip: 20878 Country: USA

Contact Phone: (301) 956-1660 ext:

Contact Email: KATHY@LABYRINTHINC.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.