



**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
000529842	SAXTON CORPORATION OF ALBANY INC	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

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

Contact Name: DANIEL WAGONER

Business Name: SAXTON CORPORATION OF ALBANY, INC.

No. and Street: 1320 ROUTE 9

City or Town: CASTLETON

State: NY Zip: 12033 Country: USA

Contact Phone: (518) 732-7704 ext:

Contact Email: DWAGONER@SAXTONSIGN.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.