



**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
000918020	WAKA Group, LLC	Certificate of Fact / Certificate of Amendment

**Total Fee: \$32.00**

**Filer's Contact Information**

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

Contact Name: DOROTHY KOLB

Business Name: WAKA GROUP LLC

No. and Street: 11951 FREEDOM DRIVE

City or Town: RESTON

State: VA

Zip: 20190

Country: USA

Contact Phone: (866) 350-1710 ext:

Contact Email: DOROTHY@KICKBALL.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.**