



**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          |
|-----------|------------------|---------------------------|
| 000521751 | Mike Albert, Ltd | Good Standing Certificate |

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: LISA WHEELER

Business Name: MIKE ALBERT

No. and Street: 10340 EVENDALE DRIVE

City or Town: CINCINNATI

State: OH

Zip: 45241

Country: USA

Contact Phone: (513) 554-2805 ext:

Contact Email: LISAW1@MIKEALBERT.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.**