



**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
000799531	360 Architecture Inc	Good Standing Certificate

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: NORA JACKSON

Business Name: POLSINELLI PC

No. and Street: 900 W 48TH PLACE

SUITE 900

City or Town: KANSAS CITY

State: MO

Zip: 64112

Country: USA

Contact Phone: (816) 360-4154 ext:

Contact Email: NJACKSON@POLSINELLI.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.**