



**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
000793726	C.U. LEASING CORP.	Good Standing Certificate

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: LOUISE KLINKE

Business Name: CU LEASING CORP

No. and Street: 3111 CAMINO DEL RIO NORTH  
SUITE 203

City or Town: SAN DIEGO

State: CA

Zip: 92108

Country: USA

Contact Phone: (619) 516-3900 ext:

Contact Email: ACCT@CULA.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.**