



**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
000156186	PLASTIC SERVICES ENTERPRISES INC.	Good Standing Certificate

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: EDWARD CASTANO

Business Name: BLUEVINE

No. and Street: 550 HAMILTON AVE, SUITE 220

City or Town: PALO ALTO State: CA Zip: 94301 Country: USA

Contact Phone: (650) 300-9974 ext:

Contact Email: RISK@BLUEVINE.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.**