



**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
000074067	COMPOSITES ONE LLC.	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

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

Contact Name: JOE JOHNSTON

Business Name: COMPOSITES ONE LLC

No. and Street: 85 W ALGONQUIN ROAD
SUITE 600

City or Town: ARLINGTON HEIGHTS

State: IL Zip: 60005 Country: USA

Contact Phone: (847) 871-1364 ext:

Contact Email: JOE.JOHNSTON@COMPOSITESONE.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.