s s	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		
HOPE			
Certificate Request Form			
Request Information (Entity Name is only required for a Certificate of Non-Existence)			
ID	ENTITY NAME	CERTIFICATE TYPE	
001670771	Solar Wolf Energy, Inc.	Letter of Status / Legal Existence	
Filer's Contact Information (Enter a contact name, mailing address and email.)			
Contact Name: <u>TAYLOR BENNETT</u> Business Name:SOLAR WOLF ENERGY			
No. and Street: 202 WORCESTER STREET			
City or Town:NORTH GRAFTONState: MA Zip: 01536Country: USAContact Phone:(508) 839-2222ext:			
Contact Email: <u>TAYLOR.B@SOLARWOLFENERGY.COM</u>			
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.			
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