	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 (E	Entity Name is only required for a C	Certificate of Non-Existence)
ID	ENTITY NAME	CERTIFICATE TYPE
001669079	Builders Design & Leasing, Inc.	Good Standing Certificate
Filer's Contact Informa	tion	
	nailing address and email.)	
Contact Name: BRIDG		
Business Name: <u>BUILD</u>	ERS DESIGN & LEASING, IN	<u>IC.</u>
No. and Street: 7901 LI		
•	ERSBURG	State: \underline{MD} Zip: $\underline{20879}$ Country: \underline{USA}
Contact Phone: (301) 590-1100 ext: Contact Email: BNEIL@BUILDERSDESIGN.COM		
Contact Email: BNEIL		
		ted response from us if the filing is rejected
Please provide an ema	il address to receive an expedit	ted response from us if the filing is rejected Il respond by mail.
Please provide an ema		
Please provide an ema	il address to receive an expedit	
Please provide an ema	il address to receive an expedit	
Please provide an ema for any reason. If no er	il address to receive an expedit	