



**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

ID	ENTITY NAME	CERTIFICATE TYPE
001675821	Perfect Commerce, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Mark Williams

Business Name: Business Filings Incorporated

No. and Street: 8020 Excelsior Dr Ste 200

City or Town: Madison State: WI Zip: 53717 Country: USA

Contact Phone: 8009817183 ext:

Contact Email: fulfillment@bizfilings.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.