



**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
000154284	Andy Frain Services, Inc.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Laura Grund

Business Name: Andy Frain Services, Inc.

No. and Street: 761 Shoreline drive

City or Town: aurora

State: IL

Zip: 60504

Country: USA

Contact Phone: 630-820-3820 ext: 1029

Contact Email: rrivera@andyfrain.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.**