



**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
000158114	Summer Infant (USA), Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Shannon Noel

Business Name: Lease Corporation of America

No. and Street: 3150 Livernois Road
Suite 300

City or Town: Troy State: UT Zip: 48083 Country: USA

Contact Phone: 2489656708 ext:

Contact Email: snoel@leasecorp.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.