



**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
000121679	Passport Automotive Group, Inc.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: serafino Cazzani

Business Name: passport autonmotive group inc

No. and Street: 55 budlong road

City or Town: cranston

State: RI

Zip: 02920

Country: USA

Contact Phone: 401-942-2400 ext:

Contact Email: passport2400@gmail.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.**