



**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
000533026	Lawson Products, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Kathy Korsch

Business Name: Lawson Products, Inc.

No. and Street: 8770 W. Bryn Mawr Avenue
Suite 900

City or Town: Chicago State: IL Zip: 60631-3515 Country: USA

Contact Phone: 773.304.5240 ext:

Contact Email: kathy.korsch@lawsonproducts.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.