



**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
000061193	LAVIGNE MANUFACTURING, INC.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: EMILY ISOM

Business Name: BANTERRA BANK

No. and Street: 401 E DEYOUNG ST

City or Town: MARION

State: IL

Zip: 62959

Country: USA

Contact Phone: 618-993-9844 ext: 36001

Contact Email: EMISOM@BANTERRA.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.**