



**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
000020738	AUTOMOTIVE RENTALS, INC.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Andrea Cairns

Business Name:

No. and Street: 120 South Central Ave, Ste 350

City or Town: Clayton

State: MO

Zip: 63105

Country: USA

Contact Phone: ext:

Contact Email: andrea.cairns@wolterskluwer.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.**