

State of Rhode Island 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
001687704	Appraisal Linx, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Blake A. Chiado</u>
Business Name: <u>Appraisal Linx, Inc</u>
No. and Street: <u>501 Duane Street</u>

City or Town: Glen Ellyn State: \underline{IL} Zip: $\underline{60137}$ Country: \underline{USA}

 $\begin{array}{lll} \mbox{Contact Phone:} & \underline{6303734444} & \mbox{ext:} \\ \mbox{Contact Email:} & \underline{qc@appraisallinx.com} \end{array}$

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