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
001715028	Ascend Collection LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Aaron
Business Name: Simmons
No. and Street: 6 Halsey Ave
City or Town: Middletown State: RI Zip: 02842 Country: USA
Contact Phone: 9806216216 ext:
Contact Email: ascendathletix@gmail.com