



**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
001726533	Segway Powersports Inc.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Thomas Kang

Business Name: Segway Powersports

No. and Street: 415A Interchange Street

City or Town: McKinney

State: TX

Zip: 75071

Country: USA

Contact Phone: 4696596357 ext:

Contact Email: thomas.kang@segwaypowersports.us