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
000135022	POLARIS SALES INC.	Certificate of Good Standing

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

Contact Name: Dan Lawrence
Business Name:
No. and Street: 2100 Highway 55
City or Town: Medina State: MN Zip: 55340 Country: USA
Contact Phone: 7635191826 ext:
Contact Email: Dan.Lawrence@polaris.com