



**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
001673644	Capital Collection Management LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Licensing Team

Business Name: Acumen Licensing

No. and Street: 600 Broadhollow Road
Suite 200

City or Town: Melville

State: NY

Zip: 11747

Country: USA

Contact Phone: 6317195509 ext:

Contact Email: licensing@acumenlicensing.com