



**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
001712400	SYSTEMIZE EXPRESS INC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Victor

Business Name: Barros

No. and Street: 1214 PARK STREET SUITE 202

City or Town: stoughton

State: RI

Zip: 02072

Country: USA

Contact Phone: 617 510 5786 ext:

Contact Email: al@alamircpa.com