



**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
000122907	USB Leasing LT	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Brian Feltes

Business Name: USB Leasing LT

No. and Street: PO BOX 2466

City or Town: OSHKOSH

State: WI

Zip: 54903

Country: USA

Contact Phone: 920.237.5312 ext:

Contact Email: brian.feltes@usbank.com