



**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
000020738	AUTOMOTIVE RENTALS, INC.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Katie Anderson

Business Name: Holman Enterprises Inc.

No. and Street: 4001 Leadenhall Road

City or Town: Mt Laurel

State: NJ

Zip: 08054

Country: USA

Contact Phone: ext:

Contact Email: kanderson@holmanenterprises.com