



**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
000157903	M-1 CORPORATION	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Michele Ramos

Business Name:

No. and Street: 900 South Avenue
Suite 200

City or Town: Staten Island State: NY Zip: 10314 Country: USA

Contact Phone: 3475282483 ext:

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