



**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
000003622	Carla Corp.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Lisa Villano

Business Name: Registered Agent Solutions Inc

No. and Street: 44 SCHOOL ST, SUITE 505

City or Town: Boston

State: MA

Zip: 02108

Country: USA

Contact Phone: 5087335004 ext:

Contact Email: lvillano@rasi.com