

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
000098868	Northeast Motion, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Tracy Preston</u>

Business Name: PNW Accounting and Tax

No. and Street: 400 Cooper Point Road SW Suite #6

City or Town: Olympia State: WA Zip: 98502 Country: USA

Contact Phone: $\overline{\underline{5306046927}}$ ext:

Contact Email: tracy@pnwaccountingandtax.com

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