



**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
001750517	Excelon Associates Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Joshua Forman

Business Name:

No. and Street: 98 Main Street

Lower Level

City or Town: Chester

State: NJ

Zip: 07930

Country: USA

Contact Phone: 5612895412 ext:

Contact Email: joshua@excelonassociates.com