



**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
000135484	I.C. System, Inc.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Christine Leick

Business Name: I.C. System, Inc.

No. and Street: 444 E HWY 96  
P O BOX 64444

City or Town: ST PAUL

State: MN Zip: 55164

Country: USA

Contact Phone: ext:

Contact Email: CLEICK@ICSYSTEM.COM