

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
000082569	Self Defense Training Center, Ltd.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Jim Ryan

Business Name:

No. and Street: 222 N LaSalle St

Ste 1700

City or Town: $\underline{\text{Chicago}}$ State: $\underline{\text{IL}}$ Zip: $\underline{60601}$ Country: $\underline{\text{USA}}$

Contact Phone: <u>6105416745</u> ext: Contact Email: <u>bera@fundation.com</u>

© 2007 - 2023 State of Rhode Island All Rights Reserved