



**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
001694882	Trileaf Corporation	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Dennis Kelley

Business Name: Trileaf Corporation

No. and Street: 1515 Des Peres Road  
Suite 200

City or Town: St. Louis

State: MO Zip: 63131

Country: USA

Contact Phone: 3149976111 ext:

Contact Email: d.kelley@trileaf.com