

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
001717670	National Power, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Emma Lentz</u>
Business Name: <u>Polsinelli</u>

No. and Street: 900 W. 48th Pl

<u>Suite 900</u>

City or Town: Kansas City State: \underline{MO} Zip: $\underline{64112}$ Country: \underline{USA}

Contact Phone: <u>8162181264</u> ext: Contact Email: <u>elentz@polsinelli.com</u>

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