

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
001726467	FH Equipment NE II, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>JEFF GRAVES</u>

 ${\tt Business\ Name:} \underline{Alliance\ Corporate\ Solutions\ LLC}$

No. and Street: $\underline{15560\ LAKEVIEW\ DRIVE}$

City or Town: MANHATTAN State: ILZip: 60442Country: USA

Contact Phone: ext:

Contact Email: LAUREN@ALLIANCECORPSOLUTIONS.COM

© 2007 - 2023 State of Rhode Island All Rights Reserved