

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
001698120	E@WRI, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Lauren Thorne</u>

 $\hbox{\tt Business Name:} \underline{\hbox{\tt COGENCY GLOBAL INC.}}$

No. and Street: 45 SCHOOL STREET

SUITE 202

City or Town: BOSTON State: MAZip: 02108Country: USA

Contact Phone: ext:

Contact Email: <u>BOSTON.ORDERS@COGENCYGLOBAL.COM</u>

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