



**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
001747985	Vision AMC, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Kenneth Nickel

Business Name:

No. and Street: P.O. Box 709

City or Town: Saint Croix Falls

State: WI

Zip: 54024

Country: USA

Contact Phone: 8886971777 ext:

Contact Email: amc@compliancelfreedom.com