

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 NAM	E CERTIFICATE TYPE
000488035	Mazda Motor of Americ	a, Inc. Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Sushant George

Business Name:

No. and Street: $\underline{200~\text{SPECTRUM CTR DRIVE, STE }100}$

City or Town: <u>IRVINE</u> State: <u>CA</u> Zip: <u>92618</u> Country: <u>USA</u>

Contact Phone: ext:

Contact Email: tax@mazdausa.com

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