

## 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
000129082	UNION LEASING, INC.	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <u>KATHIE JARZOMBEK</u>
Business Name: <u>UNION LEASING INC</u>

No. and Street:  $\underline{425\ N\ MARTINGALE\ RD\ FL\ 6}$ 

City or Town: <u>SCHAUMBURG</u> State: <u>IL</u> Zip: <u>60173</u> Country: <u>USA</u>

Contact Phone: <u>8473306233</u> ext:

Contact Email: KATHIE@UNIONLEASING.COM

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