



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
001740683	CAPITAL LEASING AND MANAGEMENT, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: DANIEL HARROP

Business Name: PPA, LLP

No. and Street: Parcel Identification Map/Lot N-A-131 Account 3324 Stat

City or Town: WARWICK

State: RI Zip: 02886 Country: USA

Contact Phone: 401-738-0010 ext: 122

Contact Email: dan@ppallp.com