



**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
001773125	KABAFUSION, INC.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Habib Rahman

Business Name: Habib Rahman, Esquire

No. and Street: 30 Westland Road

City or Town: Weston

State: MA

Zip: 02493

Country: USA

Contact Phone: 339-222-3191 ext:

Contact Email: hr1726@gmail.com