

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
000104105	CONVERSENT COMMUNICATIONS OF RHODE ISLAND, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Mike Mirrione

 ${\tt Business\ Name:} \underline{Wolz\ Corporate\ USA\ Inc.}$

No. and Street: $\underline{36}$ SOUTH 18TH AVENUE, SUITE \underline{D}

SUITE D

City or Town: BRIGHTON State: CO Zip: 80601 Country: USA

Contact Phone: <u>3036559659</u> ext:

Contact Email: mike@wolzcorporate.com

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