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
001661079	Mike's Collision, LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Brenda Klein
Business Name:
No. and Street: 4191 2nd St So
City or Town: St Cloud State: MN Zip: 56301 Country: USA
Contact Phone: 3202195252 ext:
Contact Email: aaron.fadness@stearnsbank.com