

## 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
001761837	Lighthouse Skateboarding Corp.	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <u>DEVINDER KARIR</u>
Business Name: <u>BMO BANK N.A.</u>

No. and Street:  $\underline{13300\ CROSSROADS\ PARKWAY\ NORTH}$ 

City or Town: <u>CITY OF INDUSTRY</u> State: <u>CA</u> Zip: <u>91746</u> Country: <u>USA</u>

Contact Phone: <u>5624126735</u> ext: Contact Email: <u>david.karir@bmo.com</u>

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