



**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
001789720	Collab7 Cumberland RI LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: LEANNE JENSEN

Business Name: REGISTERED AGENT SOLUTIONS INC.

No. and Street: C/O RASI 44 SCHOOL STREET SUITE 505

City or Town: BOSTON

State: MA Zip: 02108 Country: USA

Contact Phone: 6175314643 ext:

Contact Email: ljensen@rasi.com