

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
001717708	Summit Solar Solutions, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Dallin Maw</u>

 ${\tt Business\ Name:} \ \underline{Summit\ Soar\ Solutions,\ LLC}$

No. and Street: 15 Berkshire Rd

City or Town: <u>Mansfield</u> State: <u>MA</u> Zip: <u>02048</u> Country: <u>USA</u>

Contact Phone: <u>Dallin Maw</u> ext: Contact Email: <u>Dallin@summit.solar</u>

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