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
000118297	ACME AUTO LEASING, LLC	Certificate of Good Standing

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

Contact Name: Susan McElroy
Business Name: Acme Auto Leasing
No. and Street: 440 Washington Ave
City or Town: North Haven State: CT Zip: 06473 Country: USA
Contact Phone: ext:
Contact Email: smcelroy@acmeautoleasing.com