



**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
001774348	Spectacle Management Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Peter Lally

Business Name: Spectacle Management

No. and Street: 250 Apollo Drive

Spectacle Management STE 103

City or Town: Chelmsford

State: MA

Zip: 01824

Country: USA

Contact Phone: 9784950067 ext:

Contact Email: galexandropoulos@spectaclelive.com