2021 CERTIFICATE OF STATUS REQUEST FORM

WI Certificate Service

1360 Regent Street # 353 Madison WI 53715



PO Box 45116 Madison WI 53744-5116

Key Code: WI-310	6985-42	Notice Date: 10/27/2021	PLEASE RESPOND BY:
Business Address:			11/10/2021
PO Box 45116 Madison WI 53744-5116			
gal name and date of format isconsin Certificate Service v	ion. The Certificate of Status b vill mail a hard copy of your Ce Domestic Limited Liability 6/2021	ears the official seal of the Wisco vrtificate of Status to your busines	pans, to renew business licenses, or for tax or othe eagency and this notice is a solicitation for your vides a statement of an entity's status, current nsin Secretary of State. is address.
Step 1: Please Confirm	Business Name & Addres	ss Are Correct	
O Box 45116 ladison WI 53744-5116			fication:
Step 2: Contact Informa	tion - Do NOT Skip This	Step! Email & Contact Num	ber Required for Processing
lame:	Email:		Phone Number:
tep 3: Payment - Selec	ct Payment Method & D	ouble Check Payment Info	ormation
CHECK OR MONEY O	RDER ENCLOSED		ALLOW UP TO TWO WEEKS FOR

FORM WICS-CE 10.883(1)

Signature:

WI Certificate Service 1360 Regent Street # 353 Madison WI 53715

IN THE AMOUNT OF: \$72.50

Please make your check or money order payable to:

10/27/2021

Step 4: Authorization - Please Sign, Date & Return this Form with Payment Enclosed in Return Envelope Provided.

FOR OFFICE USE ONLY: WI-3106985-42

PROCESSING AND RETURN OF DOCUMENT