State of Rhode Island and Providence Plantations
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 *(Entity Name is only required for a Certificate of Non-Existence)*

ID	ENTITY NAME	CERTIFICATE TYPE
000685986	DMR Family & Cosmetic Dentistry, Inc.	Good Standing Certificate
000685957	Radulescu Holdings, LLC	Good Standing Certificate

Total Fee: $42.00

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

Contact Name: JOHN J. LEEN
Business Name:
No. and Street: 3245 MADISON AVENUE #8
City or Town: BRIDGEPORT State: CT Zip: 06606 Country: USA
Contact Phone: ext:
Contact Email: JOHNJLEEN@HOTMAIL.COM

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.