



**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
000054660	WALGREEN EASTERN CO., INC.	Good Standing Certificate

**Total Fee: \$22.00**

**Filer's Contact Information**

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

Contact Name: JULIE COUGHENOUR

Business Name: WALGREEN EASTERN CO INC

No. and Street: PO BOX 901  
ATTN JULIE COUGHENOUR

City or Town: DEERFIELD

State: IL Zip: 60015 Country: USA

Contact Phone: (847) 527-4427 ext:

Contact Email: JULIE.COUGHENOUR@WALGREENS.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.**