



**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
000541064	Mosaico Business & Community Development Corporation	Good Standing Certificate

Total Fee: \$7.00

Filer's Contact Information

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

Contact Name: TRACIE JORDAN

Business Name:

No. and Street: 194 WASHINGTON AVE
SUITE 310

City or Town: ALBANY

State: NY

Zip: 12210

Country: USA

Contact Phone: (800) 828-0938 ext:

Contact Email: TJORDAN@NATIONALCORP.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.