



**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
000056774	House of Hope Community Development Corporation	Good Standing Certificate

Total Fee: \$7.00

Filer's Contact Information

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

Contact Name: TAYLOR ELLIS

Business Name: HOUSE OF HOPE CDC

No. and Street: 3188 POST ROAD

City or Town: WARWICK

State: RI Zip: 02886 Country: USA

Contact Phone: (401) 463-3324 ext:

Contact Email: TAYLOR@THEHOUSEOFHOPECDC.ORG

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.