



**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
000006384	DEBLASIO INSURANCE, INC.	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

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

Contact Name: STEPHEN DIPRETE

Business Name: DEBLASIO INSURANCE

No. and Street: 1169 PARK AVENUE

City or Town: CRANSTON

State: RI

Zip: 02910

Country: USA

Contact Phone: (401) 943-0900 ext:

Contact Email: SD@DEBLASIOINS.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.