	State of Rhode Island and Providence Plantations Office of the Secretary of State			
HOPE	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 TY	CERTIFICATE TYPE	
000048299	The Rhode Island State Nurses' Association	Good Standing Certifi	Good Standing Certificate	
Total Fee: \$7.00				
Filer's Contact Information (Enter a contact name, mailing address and email.) Contact Name: DONNA POLICASTRO Business Name: No. and Street: 1800 D MINERAL SPRING AVENUE				
City or Town:NORTH PROVIDENCEState: RIZip: 02904Country: USAContact Phone:(401) 486-4491 ext:				
Contact Email: <u>MICHAEL@P-AADVISORS.COM</u> 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.				
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