



**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
000149592	LEPRE PHYSICAL THERAPY OF BARRINGTON, LLC	Long Form Good Standing

Total Fee: \$188.00

Filer's Contact Information

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

Contact Name: JAMES A. DONNELLY

Business Name: JAMES A. DONNELLY ATTORNEY AT LAW

No. and Street: 139 CAMDEN COURT

City or Town: SOUTH KINGSTOWN

State: RI Zip: 02879 Country: USA

Contact Phone: (401) 792-3533 ext:

Contact Email: JIMDONNELLYLAW@GMAIL.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.