



**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
000000783	ALPINE AUTO BODY, INC.	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

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

Contact Name: RAYMOND BUCO JR

Business Name: ALPINE AUTO BODY, INC

No. and Street: 416 WEST FOUNTAIN ST.

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: US

Contact Phone: 401-421-6770 ext:

Contact Email: ALPINEAUTOBODY@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.