



**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
000788757	Coastline Emergency Medical Services, Inc	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

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

Contact Name: MARK HASKELL

Business Name:

No. and Street: 1970 PAWTUCKET AVE

City or Town: EAST PROVIDENCE State: RI Zip: 02714 Country: USA

Contact Phone: (508) 525-7953 ext:

Contact Email: MHASKELL@COMCAST.NET

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.