



**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
000010874	SHERMAN'S AUTO BODY, INC.	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

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

Contact Name: DALE SHERMAN

Business Name: SHERMANS AUTO BODY INC

No. and Street: PO BOX 204

City or Town: SHANNOCK RD

State: RI

Zip: 02875

Country: USA

Contact Phone: 401 451 4290 ext:

Contact Email: DALESHERMAN1@COX.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.