



**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
000507385	Barrington Urgent Care, PC	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

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

Contact Name: DONNA WALSH

Business Name: BARRINGTON URGENT CARE PC

No. and Street: 310 MAPLE AVE
SUITE EMC

City or Town: BARRINGTON

State: RI

Zip: 02806

Country: USA

Contact Phone: (401) 289-0011 ext:

Contact Email: DWALSH@BARRINGTONUC.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.