	ence Plantation f State	S		
HOPE	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040			
Certificate Request I	Form			
Request Information (Entity Name is only required for a Certificate of Non-Existence)				
ID	ENTITY NAME		CERTIFICATE TYPE	
000161052	New England Sanitary Supply Association		Good Standing Certificate	
Total Fee: \$7.00				
Filer's Contact Information   (Enter a contact name, mailing address and email.)   Contact Name:   COLE CALLAHAN   Business Name:   No. and Street: 540 HOPE ST				
City or Town:PROVIContact Phone:(617) 2	<u>DENCE</u> 85-0425 ext:	State: <u>RI</u>	Zip: <u>02906</u>	Country: <u>USA</u>
Contact Email: <u>INFO@NESSA-ONLINE.COM</u> 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.				
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