



**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

ID	ENTITY NAME	CERTIFICATE TYPE
000028871	PHI CORPORATION OF SIGMA KAPPA	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Peggy Cook

Business Name:

No. and Street: 695 Pro Med Ln Suite 300

City or Town: Carmel

State: IN

Zip: 46032

Country: USA

Contact Phone: ext:

Contact Email: lvaro@sigmakappa.org

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.