



**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
000027470	BLOCK ISLAND HEALTH SERVICES, INC.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Mark Clark

Business Name: Block Island Health Services

No. and Street: Box 919 Block Island Medical Center
6 Payne Road

City or Town: Block Island

State: RI

Zip: 02807

Country: USA

Contact Phone: (401)466-2974 ext:

Contact Email: markclarkmd@gmail.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.