



**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
001673752	Management Health Systems, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Tom Choy

Business Name: Management Health Systems, LLC

No. and Street: 1580 Sawgrass Corporate Pkwy.
Suite 200

City or Town: Sunrise

State: FL

Zip: 33323

Country: USA

Contact Phone: 954-228-7342 ext:

Contact Email: tchoy@medprostaffing.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.