



**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
001685540	Avitus Group Insurance, Inc.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Diana Cox

Business Name: Avitus Group

No. and Street: 175 N. 27th St.  
Ste. 800

City or Town: BILLINGS

State: MT

Zip: 59101

Country: USA

Contact Phone: 4062557470 ext:

Contact Email: dcox@avitusgroup.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.**