



**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
000051698	Thrive Behavioral Health Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Sandra Matrone Mack

Business Name: Mack Law Associates LLC

No. and Street: 50 So. Main Street
Suite 308S

City or Town: Providence

State: RI

Zip: 02908

Country: USA

Contact Phone: 4012720221 ext:

Contact Email: kwalsh@macklawllc.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.