



**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
001672423	Copart of Connecticut, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Kristi Rogers

Business Name: Copart of Connecticut, Inc

No. and Street: 14185 Dallas Pkwy Suite 300

City or Town: DALLAS

State: TX

Zip: 75254

Country: USA

Contact Phone: 9723915224 ext:

Contact Email: renew.dept@Copart.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.