



**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
001680408	Practice Exchange LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: James Brady

Business Name: TD Bank

No. and Street: 1700 District Ave 2nd Floor

City or Town: Burlington

State: MA

Zip: 01803

Country: USA

Contact Phone: 6174597238 ext:

Contact Email: james.brady@td.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.