



**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
000056774	House of Hope Community Development Corporation	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Kim Hedenberg

Business Name: House of Hope CDC

No. and Street: 3188 Post Rd

City or Town: Warwick

State: RI

Zip: 02886

Country: USA

Contact Phone: ext:

Contact Email: kim@thehouseofhopecdc.org

**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.**