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
000113686	BAY AREA MOBILE MEDICAL, LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Annemarie Feeley
Business Name: Navigant Credit Union
No. and Street: 1005 Douglas Pike
City or Town: Smithfield State: RI Zip: 02917 Country: USA
Contact Phone: 401-233-4721 ext:
Contact Email: afeeley@navigantcu.org