



**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
000263999	Atlantic Mortgage & Finance Corporation	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: ANGELA DASHIELL

Business Name: CREDIT PLUS INC

No. and Street: 31550 WINTERPLACE PKWY

City or Town: SALISBURY

State: MD

Zip: 21804

Country: USA

Contact Phone: 800-258-3488 ext: 1118

Contact Email: ADASHIELL@CREDITPLUS.COM