



**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
000108545	BANKERS MORTGAGE CORP.	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