



**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
000064826	AmWINS Group Benefits, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Shafaq Chaudhry

Business Name:

No. and Street: 65 LaSalle Road
Suite 400

City or Town: WEST HARTFORD State: CT Zip: 06107 Country: USA

Contact Phone: 8607264707 ext:

Contact Email: schaudhry@accelcompliance.com