

## 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
001704275	ASSURANCE AGENCY, LTD.	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <u>TIA BAUGHER</u>
Business Name: <u>Cogency Global Inc.</u>
No. and Street: <u>600 S. SECOND ST.</u>

City or Town:  $\underline{SPRINGFIELD}$  State:  $\underline{IL}$  Zip:  $\underline{62704}$  Country:  $\underline{USA}$ 

Contact Phone:  $\underline{8888836300}$  ext:

Contact Email: TBAUGHER@COGENCYGLOBAL.COM

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