

State of Rhode Island 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
000110166	Beta Group, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Cheryl Souza</u>
Business Name: <u>BETA Group, Inc.</u>

No. and Street: 701 George Washington Highway

City or Town: Lincoln State: RI Zip: 02865 Country: USA

Contact Phone: $\underline{4013332382}$ ext: $\underline{190}$ Contact Email: $\underline{csouza@beta-inc.com}$

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