



**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
000788757	Coastline Emergency Medical Services, Inc	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Denise Martinez

Business Name: BayCoast Bank

No. and Street: 23 Elm St.

City or Town: New Bedford

State: MA

Zip: 02740

Country: USA

Contact Phone: 508-235-9572 ext:

Contact Email: dmartinez@baycoastbank.com