

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
001662067	Pier Medical, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Paul Senecal
Business Name: Pier Medical
No. and Street: 55 Cherry Lane

City or Town: Wakefield State: RI Zip: 02879 Country: USA

 $\begin{array}{lll} \mbox{Contact Phone:} & \underline{4012126352} & \mbox{ext:} \\ \mbox{Contact Email:} & \underline{pasenecal@gmail.com} \end{array}$

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