

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
000526284	Thomas C. Slater Compassion Center, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Robyn Foster

Business Name: Resnick and Caffrey, PC
No. and Street: 300 CENTERVILLE ROAD

SUMMIT WEST, SUITE 300

City or Town: WARWICK State: RI Zip: 02886 Country: USA

Contact Phone: <u>14017384500</u> ext:

Contact Email: rfoster@resnickandcaffrey.com

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