



**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
000149356	Neuropsychology Partners, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Michelle D. Baker, Esq.

Business Name:

No. and Street: 1420 Mendon Road

City or Town: Cumberland

State: RI

Zip: 02864

Country: USA

Contact Phone: 401-257-6420 ext:

Contact Email: michelle@mblaw.co