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
001668085	AmRes Corporation	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Carly Coassolo
Business Name: AmRes Corporation
No. and Street: One Neshaminy Interplex
Suite 310
City or Town: Trevose State: PA Zip: 19053 Country: USA
Contact Phone: 2156318130 ext:
Contact Email: licensing@amreslending.com