



**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
000792305	Harrisville Dental Associates, P.C.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Joseph Bassi

Business Name: Wolpert & Associates

No. and Street: 10 Dorrance Street, Suite 530

City or Town: Providence

State: RI

Zip: 02903

Country: USA

Contact Phone: 4014218700 ext: 13

Contact Email: jbassi@wolpertlaw.com