



**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

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