



**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
000531050	DENTEMAX, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: KIRSTEN WASHINGTON

Business Name:

No. and Street: 1701 DIRECTORS BLVD.
SUITE 300

City or Town: AUSTIN

State: TX

Zip: 78744

Country: USA

Contact Phone: ext:

Contact Email: KWASHINGTON@RASI.COM