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
000064902	Impact Center Providence AG	Certificate of Fact - Name Change
000064902	Impact Center Providence AG	Certificate of Fact - Certificate of Merger

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

Contact Name: REV. KPEHE PERCY BALLAH
Business Name: IMPACT CENTER PROVIDENCE AG
No. and Street: 353 ELMWOOD AVENUE
P. O. BOX 2172
City or Town: PROVIDENCE State: RI Zip: 02905 Country: USA
Contact Phone: 401-602-1294 ext:
Contact Email: IMPACTPVD@GMAIL.COM