



**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
000104275	Dean Auto Collision Center, Inc.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: ANGELICA COLAFRANCESCO

Business Name: DEAN AUTO COLLISION CENTER INC

No. and Street: P O 9103

City or Town: PROVIDENCE

State: RI

Zip: 02904

Country: USA

Contact Phone: 401 4653218 ext:

Contact Email: angelica@deanautocollision.com