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
001727827	Providence Wellness, LLC	Certificate of Good Standing

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

Contact Name: alexander karoff-hunger
Business Name: Providence Wellness, LLC
No. and Street: 669 Public Street
City or Town: Providence State: RI Zip: 02907 Country: USA
Contact Phone: 4015853729 ext:
Contact Email: Alex@providencewellnessllc.com