

## 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
001335168	VIDEOLOGY IMAGING SOLUTIONS, INC.	Certificate of Good Standing

## **Filer's Contact Information**

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

Contact Name: <u>CATHY JACOBSEN</u>

Business Name: <u>VIDEOLOGY IMAGING SOLUTIONS, INC.</u>

No. and Street: 37M LARK INDUSTRIAL PARKWAY

City or Town: <u>GREENVILLE</u> State: <u>RI</u> Zip: <u>02828</u> Country: <u>USA</u>

Contact Phone:  $\underline{401-949-5332}$  ext:  $\underline{118}$ 

Contact Email: CJACOBSEN@VIDEOLOGYINC.COM

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