



**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
001710143	GoodRx, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Monica Wamsley

Business Name: GoodRx, Inc.

No. and Street: 2701 Olympic Blvd
West Building - STE 200

City or Town: Santa Monica State: CA Zip: 90404 Country: USA

Contact Phone: 310-593-9970 ext:

Contact Email: tax@goodrx.com