



**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
001730335	Misty Stafford, M.D., LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Misty Stafford

Business Name: Misty Stafford, M.D., LLC

No. and Street: 16 Bornheimer Pl

City or Town: Scarborough

State: ME

Zip: 04074

Country: USA

Contact Phone: ext:

Contact Email: msmd@mistystaffordmd.org