



**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
001340463	North Providence Collision Center, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Michael Petrarca

Business Name: North Providence Collision Cen

No. and Street: 3 Tag Drive

City or Town: North Providence

State: RI

Zip: 02911

Country: USA

Contact Phone: 401.354.8600 ext:

Contact Email: mpetra5185@aol.com