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
001690629	Hope Care Ride, Inc.	Certificate of Good Standing

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

Contact Name: Kimberly W. Santilli
Business Name: Hope Care Ride, Inc.
No. and Street: 1049 Park Avenue
City or Town: Cranston State: RI Zip: 02910 Country: USA
Contact Phone: 14019467275 ext:
Contact Email: ksantilli@parkaveseniorcare.com