



**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
000150060	Education Insurance Plans, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: David Galvin

Business Name:

No. and Street: 9 Binney St

City or Town: Newport State: RI Zip: 02840 Country: USA

Contact Phone: 4012255750 ext:

Contact Email: dgalvin@educationinsuranceplans.com