



**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
000126668	RI Association for Infant Mental Health	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Maryann Lynch

Business Name: RIAIMH

No. and Street: 350 Point Street

City or Town: Providence

State: RI

Zip: 02903

Country: USA

Contact Phone: ext:

Contact Email: business@riaimh.org