



**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
000846755	HEALTHCARE IT LEADERS, LLC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Joseph Lepore

Business Name: Healthcare IT Leaders, LLC

No. and Street: 925 North Point Parkway

Suite 425

City or Town: Alpharetta

State: GA

Zip: 30005

Country: USA

Contact Phone: ext:

Contact Email: joe.lepore@healthcareitleaders.com