



**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
001728822	Municipal Emergency Services, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Carolyn SKARYAK

Business Name: MUNICIPAL EMERGENCY SERVICES, INC.

No. and Street: 12 TURNBERRY LANE
2ND FLOOR

City or Town: SANDY HOOK

State: CT Zip: 06482 Country: USA

Contact Phone: ext:

Contact Email: AP@MESFIRE.COM