



**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             |
|-----------|-----------------|------------------------------|
| 001751023 | HEALING BRIDGES | Certificate of Good Standing |

**Filer's Contact Information**

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

Contact Name: Carlos Salinas

Business Name:

No. and Street: P.O. Box 265

City or Town: New Shoreham

State: RI

Zip: 02807

Country: USA

Contact Phone: ext:

Contact Email: carlos@vidalinda.info