

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
000135696	Endoscopy Associates, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Alice Micklich

Business Name:

No. and Street: $\underline{44\ WEST\ RIVER\ STREET}$

City or Town: PROVIDENCE State: RI Zip: 02904 Country: USA

Contact Phone: <u>4012744800</u> ext: <u>201</u> Contact Email: <u>alicemicklich@yahoo.com</u>

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