



**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
001755640	GREENWICH BAY INTERNAL MEDICINE LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Courtney F Mattson

Business Name: Navigant Credit Union

No. and Street: 1005 Douglas Pike

City or Town: Smithfield

State: RI

Zip: 02917

Country: USA

Contact Phone: 4012333675 ext:

Contact Email: cmattson@navigantcu.org