



**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
000792216	CareWell Urgent Care of Rhode Island, P.C.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Gray Harrington

Business Name: ClearChoiceMD Urgent Care

No. and Street: 10 Ferry Street  
Suite 302

City or Town: Concord

State: NH

Zip: 03301

Country: USA

Contact Phone: 6035264635 ext: 0129

Contact Email: gharrington@ccmdcenters.com