



**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
000960401	Providence Promise	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Madalyn Ciampi

Business Name: Providence Promise

No. and Street: 2 Regency Plaza

Ste 12

City or Town: Providence

State: RI

Zip: 02903

Country: USA

Contact Phone: 4015722184 ext:

Contact Email: mciampi@pvdpromise.org