



**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
000149198	Corporation for Supportive Housing	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Karen McKeown

Business Name:

No. and Street: 194 Washington Ave
Suite 310

City or Town: Albany State: NY Zip: 12210 Country: USA

Contact Phone: 8008280938 ext:

Contact Email: MTEETER@COGENCYGLOBAL.COM