



**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             |
|-----------|-------------------------------------|------------------------------|
| 000141953 | ARA-PROVIDENCE DIALYSIS LLC         | Certificate of Good Standing |
| 000148997 | DIALYSIS CENTER OF WAKEFIELD LLC    | Certificate of Good Standing |
| 000138502 | ARA-EAST PROVIDENCE DIALYSIS LLC    | Certificate of Good Standing |
| 000148894 | DIALYSIS CENTER OF WEST WARWICK LLC | Certificate of Good Standing |
| 000148897 | DIALYSIS CENTER OF WESTERLY LLC     | Certificate of Good Standing |

**Filer's Contact Information**

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

Contact Name: VINCE DILLIVAN

Business Name: CSC

No. and Street: 2711 Centerville Rd Suite 400

City or Town: WILMINGTON

State: DE Zip: 19808 Country: USA

Contact Phone: 8008585294 ext:

Contact Email: DRFULFILLMENT@CSCGLOBAL.COM