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
001733734	Medicus IT LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Constance Lawson
Business Name: Cogency
No. and Street: 115 N. Calhoun St Ste 4
City or Town: Tallahassee State: FL Zip: 32301 Country: USA
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