



**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
001751302	VITACARE PRESCRIPTION SERVICES, INC.	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: ext:

Contact Email: DRFULFILLMENT@CSCGLOBAL.COM