

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
001022140	Management Registry, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>LISA REED</u>

 $\hbox{\tt Business Name:} \ \underline{MANAGEMENT\ REGISTRY\ INC}$

No. and Street: 1868 CAMPUS PL

SUITE 610

City or Town: Louisville State: KY Zip: 40299 Country: USA

Contact Phone: 5024562380 ext:

Contact Email: <u>lisa.reed@malonesolutions.com</u>

© 2007 - 2024 State of Rhode Island All Rights Reserved