



**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
000119121	Oral Surgery & Dental Implant Center Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Gerard R. Goulet

Business Name:

No. and Street: 215 Crestwood Rd.

City or Town: Warwick

State: RI

Zip: 02886

Country: USA

Contact Phone: 4014478613 ext:

Contact Email: Gerard.goulet@gmail.com