



**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
001776777	Covered Care, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Evangelina Calderon

Business Name: Covered Care, LLC

No. and Street: 4751 Wilshire Blvd., Suite 100

City or Town: Los Angeles

State: CA

Zip: 90010

Country: USA

Contact Phone: 3238375851 ext:

Contact Email: bcalderon@westlakefinancial.com