



**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
000654376	ARBOR HILL ASSISTED LIVING	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Joseph Durand

Business Name: Linn Health and Rehabilitation

No. and Street: 30 Alexander Ave

City or Town: EAST PROVIDENCE

State: RI

Zip: 02914

Country: USA

Contact Phone: 4014387210 ext:

Contact Email: cfo@aldersbridge.org