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
000009771	GAROFALO & ASSOCIATES, INC.	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: DAVID L. PARENT, CPA
Business Name: GAROFALO & ASSOCIATES, INC.
No. and Street: 85 CORLISS ST.
P.O. BOX 6145
City or Town: PROVIDENCE State: RI Zip: 02940 Country: USA
Contact Phone: 4012736000 ext:
Contact Email: dparent@garofaloassociates.com