

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
000001746	B & D ASSOCIATES, INC.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Lynne Thornton

Business Name: <u>B & D Associates, Inc</u>

No. and Street: $\underline{PO\ BOX\ 598}$

City or Town: Concord State: NH Zip: 03302 Country: USA

Contact Phone: <u>603-224-1157</u> ext:

Contact Email: lynne@safemedicalwaste.com

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