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
000031822	James L. Maher Center	Certificate of Good Standing

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

Contact Name: Denise Domin
Business Name:
No. and Street: 906 Aquidneck Avenue
City or Town: Middletown State: RI Zip: 02842 Country: USA
Contact Phone: ext:
Contact Email: ddomin@mahercenter.org