



**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
000088555	CURRERI COLLISION CENTER, INC.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Cyndi Payne

Business Name: Curreri Collision Center Inc

No. and Street: 2160 Hartford Avenue

City or Town: Johnston

State: RI

Zip: 02919

Country: USA

Contact Phone: 4019342300 ext:

Contact Email: currecollision@gmail.com