

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
000113400	First American Administrators, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: SABRINA TILLAPAUGH

Business Name:

No. and Street: 908 Pompton Avenue

A2

City or Town: $\underline{CEDAR\ GROVE}$ State: \underline{NJ} Zip: $\underline{07009}$ Country: \underline{USA}

Contact Phone: ext:

 ${\tt Contact\ Email:}\ \underline{\tt JCASWELL@CCSLEGAL.COM}$

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