



**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
000073775	City Year, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Susannah Harris

Business Name: City Year Providence

No. and Street: 1029 North Stuart Street
Apt 500

City or Town: 22201

State: VA

Zip: 22201

Country: USA

Contact Phone: 7034650121 ext:

Contact Email: sharris2@cityyear.org