



**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
001672423	Copart of Connecticut, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Carrie Depew

Business Name: Copart of Connecticut, Inc

No. and Street: 14185 Dallas Pkwy Ste 300

Attn Licensing

City or Town: Dallas

State: TX

Zip: 75254

Country: USA

Contact Phone: (972) 391-5224 ext:

Contact Email: licensing.dept@copart.com