



**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
001781788	Atlas VMS, Inc.	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Erik Morin

Business Name: Atlas VMS

No. and Street: 1000 Brickell Av
715-5043

City or Town: Miami

State: FL

Zip: 33131

Country: USA

Contact Phone: 3108060987 ext:

Contact Email: Compliance@atlasvms.com