



**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
001767974	BELLA NAIL & SPA INC	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: HEE KYUNG KIM

Business Name: HEE KYUNG KIM CPA PC

No. and Street: 45-27 SPRINGFIELD BLVD.

City or Town: BAYSIDE

State: NY

Zip: 11361

Country: USA

Contact Phone: 7182812264 ext:

Contact Email: dmhdcpa@hotmail.com