

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
001786032	CORNERSTONE CAREGIVING EAST, LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Carolyn Weaver

Business Name: <u>Pakis, Giotes, Burleson</u>

No. and Street: 400 Austin Avenue, suite 400

City or Town: \underline{Waco} State: \underline{TX} Zip: $\underline{76701}$ Country: \underline{USA}

Contact Phone: <u>2542977300</u> ext: Contact Email: <u>csw@pakislaw.com</u>

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