

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
001786247	Fairbanks Insurance Brokers Inc	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: <u>Douglas F Walters</u>

 $\hbox{\tt Business Name:} \, \underline{Douglas\,F\,Walters\,APC}$

No. and Street: 12626 High Bluff Drive, Suite 300

City or Town: San Diego State: CA Zip: 92130 Country: USA

Contact Phone: $\underline{6197429456}$ ext:

Contact Email: dwalters@dfw-law.net

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