



**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
000307524	EPOCH SLEEP CENTERS LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Bradley Redmon

Business Name:

No. and Street: 5471 Kearny Villa Rd
Suite 200

City or Town: San Diego State: CA Zip: 92123 Country: USA

Contact Phone: ext:

Contact Email: bredmon@betternight.com