



**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 |
|-----------|--------------------------|------------------------------|
| 001726156 | PVD CARES PSYCHIATRY LLC | Certificate of Good Standing |

Filer's Contact Information

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

Contact Name: LOVETTE DOBSON

Business Name:

No. and Street: 17350 STATE HWY 249 STE 220

City or Town: HOUSTON

State: TX

Zip: 77064

Country: USA

Contact Phone: 8884623453 ext:

Contact Email: EFILE1234@INCFILE.COM