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
001752548	Kinesia, Inc.	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Mark Torok
Business Name: Kinesia, Inc.
No. and Street: 44 Sandy Bottom Shores Dr.
City or Town: Wakefield State: RI Zip: 02879 Country: USA
Contact Phone: ext:
Contact Email: mark.torok@kinesiahealth.com