

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
000026094	DAVINCI CENTER COMMUNITY PROGRESS	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Norma Gonzalez

 ${\hbox{\tt Business Name:}} \underline{DaVinci\ Center\ for\ Community\ P}$

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City or Town: PROVIDENCE State: RI Zip: 02904 Country: USA

Contact Phone: <u>4012727474</u> ext:

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