



**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
001797645	CourseScope LLC	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Carla Swanson

Business Name: CourseScope LLC

No. and Street: 1096 South Road

City or Town: East Greenwich

State: RI

Zip: 02818

Country: USA

Contact Phone: 401-439-5992 ext:

Contact Email: carla@coursescope.ai