## 100000000840

(Requ	uestor's Name)		
(Addr	ess)		
(Addr	ess)		
(City/S	State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Busir	ness Entity Nam	ne)	
(Docu	ment Number)	<del></del>	
(===:			
Certified Copies	Certificates	Certificates of Status	
Special Instructions to File	ing Officer:	<del></del>	
	•		

Office Use Only



400208820294

PUISA

## Rivera, Maribel -

From;: Sent:

G. Jeffrey Elian [adhc22@gmail.com] Thursday, June 30, 2011 5:24 PM CorpAddressChange GJE

To:

Cc:

Subject:

Change of address

Sirs

Please note change of address

<u>Old</u>

8521 Club Estates Way

Lake Worth, Fl 33467

New

8261 Azure Coast Blvd

Lake Worth, Fl 33467

Thank you

## Alzheimer's-Dementia Specialized In-Home Care LLC

Document Number L10000020840 FEI/EIN Number 272202960