

L04000013653

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(City/State/Zip/Phone #)

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**From:** Pedro Paredes [pyservices@bellsouth.net]  
**Sent:** Friday, May 28, 2010 9:40 AM  
**To:** CorpAddressChange  
**Subject:** L04000013653

ADDRESS CHANGE:

NAME: ASSOCIATED MEDICAL PRACTICE, LLC.  
STATE ID # L04000013653

NEW MAILING ADDRESS: P.O. BOX 260340, PEMBROKE PINES FL 33026

THANKS

Pedro Paredes  
FPY Accounting Services, Inc.  
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