

L05000032889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

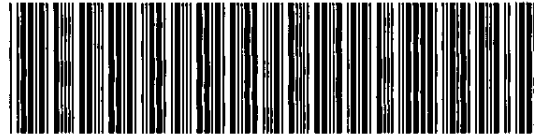
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500180535095

K 5/11/10
E. DENNARD

Malave, Erin

From: Chris York [stereodrum@yahoo.com]

Sent: Friday, May 07, 2010 12:52 AM

To: CorpAddressChange

Subject: Address change....

Doc # L05000032889
Stereoside, LLC
4635 SE 59th St
Ocala, FL 34480