

L07000050595

(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



500163434985

AC  
12/21/09  
*[Signature]*

**Malave, Erin M.**

L070060505 95

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**From:** Melanie Menendez, MS [menendezgroup@aol.com]  
**Sent:** Monday, December 21, 2009 5:17 PM  
**To:** CorpAddressChange  
**Subject:** Address Change: FEID# 77 068 6018

Hello,

Please update my address.

Employer Identification #: 77 068 6018

674 Coral Trace Blvd.  
Edgewater, Fl. 32132

Professional Regards,

**Melanie Menendez, MS**

The Menendez Group  
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