

L07000075663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

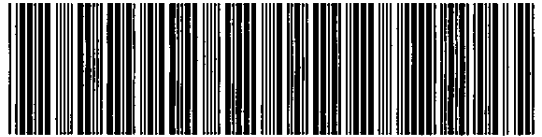
(Business Entity Name)

(Document Number)

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12/14/09

**Malave, Erin M.**

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**From:** jlobel@coachcomp.com  
**Sent:** Monday, December 14, 2009 3:49 PM  
**To:** CorpAddressChange  
**Subject:** Address Change  
**Importance:** High

Good Afternoon;

With regard to West Broward Urgent Care LLC, EIN Number 26-0586216, Doc #L07000075663, please change the PRINCIPAL ADDRESS to:

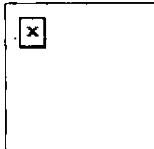
1911 North Pine Island Road  
Plantation, FL 33322

The mailing address is not changing.

Please confirm the change as soon as possible. Thank you

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Regards  
James S. Lobel-Registered Agent and CEO

West Broward Urgent Care LLC



Urgent Care  
Occupational Medicine  
Workers Comp.  
Cell: 954-415-5208  
<http://www.intergoldllc.com>