L08000112742

(Requestor's Name)		
(Address)		
(Address)		
(Ci	ty/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

7/30/09



200158679042

the transfer and the

2 60 00 Jo

Murphy, Erin L.

From: Abhi Lokesh [abhilokesh@gmail.com]

Sent: Wednesday, July 29, 2009 12:27 PM

To: CorpAddressChange

Subject: Fracture LLC Address Change

Good Afternoon,

I would like to notify you of a change in the mailing address and principal office of Fracture LLC, Document Number: L08000112742

Our old mailing address/principal office was: 1901 NW 67th Place Suite I, Gainesville FL 32653.

Our new mailing address/principal office is: 1901 NW 67th Place Suite A, Gainesville FL, 32653.

In addition, the address of Managing Member Abhimanyu Lokesh has changed to: 320 SE 3rd Street, Apt. D1 Gainesville, FL 32601

Sincerely, Abhi Lokesh