

L09000057888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

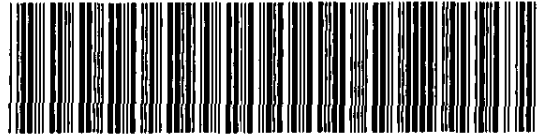
(Business Entity Name)

(Document Number)

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To S/24/11 A/C

Rivera, Maribel

From: pmarley@virtualincorporator.com on behalf of support@floridaincorporator.com
Sent: Tuesday, May 24, 2011 9:42 PM
To: CorpAddressChange
Subject: SOFCEL LLC - L09000057888 - Request for change of business address

To Florida Department of State - Division of Corporations -
corpaddresschange@dos.state.fl.us,

This is a request for change of address for:

Business Name: SOFCEL LLC
Document Number: L09000057888

This request for change of address was submitted to us by:

Representative Name: ISABELLA GRAMISCELLI
Phone Number: 305 987-0143

The new business addresses are:

Principal Address

9619 FONTAINEBLEAU BLVD 207
MIAMI FL 33172 US

Mailing Address

9619 FONTAINEBLEAU BLVD 207
MIAMI FL 33172 US

If you have any questions or concerns, feel free to contact our Support Team at
support@floridaincorporator.com.

Best regards,

Support Team
Florida Incorporator™
Phone: 1-888-800-9573
Fax: 1-800-824-4954
Email: support@FloridaIncorporator.com
<http://www.FloridaIncorporator.com>

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