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(Requestor's Name)		
(Address)		
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(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number) · ·		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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The First Re

Malave, Erin M.

L 090000 69754

From:

Wave4343@aol.com

Sent:

Sunday, December 13, 2009 8:39 PM

To:

CorpAddressChange

Subject: New Address

I want to make sure you have my new address for:

Hands On Handpieces LLC 10204 Lundy Ct. Orlando, FI 32836

FE IN #264-45-3168

Thank You

Alan Wagner / Owner

10/14/2000