

L09000089550

(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



600174426456

AC 4/9/10
E. DENNARD

Malave, Erin

LOG000089550

From: Monica Simpson [MSimpson@fhscardiology.com]
Sent: Wednesday, April 07, 2010 10:06 AM
To: CorpAddressChange
Cc: browardprimarycare@gmail.com
Subject: Broward Primary Care LLC address change
Importance: High

Broward Primary Care LLC EIN 27-0969956

Mailing and Office address change

Old:

320 S Flamingo Rd #358

Pembroke Pines, FL 33027

New:

320 S Flamingo Rd # 197

Pembroke Pines, FL 33027

Contact information:

Monica Simpson

msimpson@fhscardiology.com

954-436-6660