

LO9000101893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

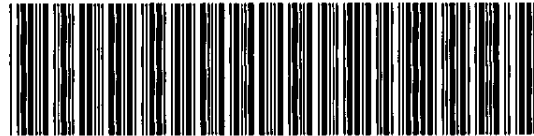
(Business Entity Name)

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*AC*

Malave, Erin

LOG000101893

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**From:** capricorn1784@aol.com

**Sent:** Monday, September 20, 2010 10:59 AM

**To:** CorpAddressChange

**Subject:** Quality Renovatin Services LLC

I need to change the Principle address and Mailing address so that they match the Registered Agents Address.

All three addresses should be :

2449 Beacon Dr

Port Charlotte, FL 33952

If there are additional fees or forms required please let me know.

Thank you,

Shanna Primeaux

941-740-0161