

L1000 000 1430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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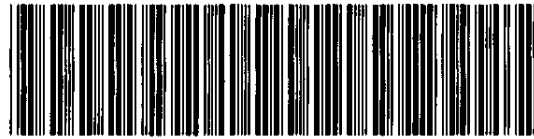
(Business Entity Name)

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**Malave, Erin**

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**From:** Palmer Insurance [palmerinsurance@live.com]  
**Sent:** Monday, July 19, 2010 1:52 PM  
**To:** CorpAddressChange  
**Subject:** L10000001430 palmer Insurance

Please change my location address to 611 SE 11<sup>th</sup> Street Unit C Cape Coral, FL 33990. Thank you, Rhonda

**Rhonda Palmer**  
**Agent**  
**Palmer Insurance and Financial Services, LLC**  
**611 SE 11th Street Unit C**  
**Cape Coral, FL 33990**  
**Ph. 239-242-8090**  
**Fx. 239-242-8089**