L10000 00248 72

(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

000181420830

AC 5/25/10
E. DENNARD

Malave, Erin

From: Ivis Quesada [ivisquesada@yahoo.com]
Sent: Monday, May 24, 2010 7:52 PM
To: CorpAddressChange
Subject: Change of Address

Hello,

I would like to change the Address of the current Managers/Member Details (Ivis Quesada and Erik Fernandez Perez) for Adult Medical Care Associates L10000024872 from:

3452 Crystal Lane
Davie, FL 33330

to:

5612 Taft St
Hollywood, FL 33021

Thankyou,
Ivis Quesada