

L10000086506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

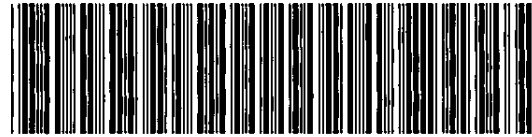
(Business Entity Name)

(Document Number)

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**Malave, Erin**

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**From:** Ileaness Monzon [ileaness@yahoo.com]  
**Sent:** Wednesday, September 08, 2010 4:07 PM  
**To:** CorpAddressChange  
**Subject:** Change of mailing address for business entity

Hello,

I would like to change the mailing address for the following business entity:

Entity Name: ABC Land Therapy Services, LLC.  
Document Number: L10000086506  
New address: 1020 East Osceola Parkway  
Kissimmee, FL 34744

Thank you.