

L18000106444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

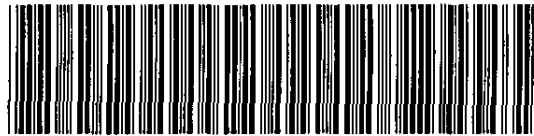
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300192039563

TS. 1/13/11 update fee #

**Rivera, Maribel**

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**From:** Dominick Sindone [dominick@faia-fl.com]  
**Sent:** Thursday, January 13, 2011 9:06 AM  
**To:** CorpAddressChange  
**Subject:** tax id # on profile  
**Attachments:** image001.jpg

Hello

My business name is:

First Associated Insurance Agency P.L.L.C  
109 E. Oakland Park Blvd.  
Oakland Park, Florida 33334

I need my tax id added to the profile .. it is 273670629

Please update the records as soon as possible.

Thank you very much

*Dominick R. Sindone*  
*First Associated Insurance Agency*  
*President/Owner*  
*954-990-5758*  
*dominick@faia-fl.com*