

NO90000009939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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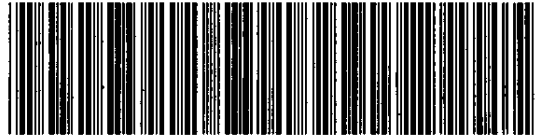
(Business Entity Name)

(Document Number)

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Principal
address
change

APL
12/2/09

Ramsey, Annette

From: Adrian Brion [Abrion@form-a-corp.com]
Sent: Wednesday, December 02, 2009 10:57 AM
To: Ramsey, Annette
Subject: Sunrise Counseling and Rehabilitation Services Inc.

Corporate Name:
Sunrise Counseling and Rehabilitation Services Inc.

Document Number:
N09000009939

Please change the Principal Business Address to:

11216 219th Street
Queens Village, NY 11429

Thank you for your assistance with this and Happy Holidays.

Sincerely,

Adrian Brion

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TALLAHASSEE FLORIDA