

PD2000045138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

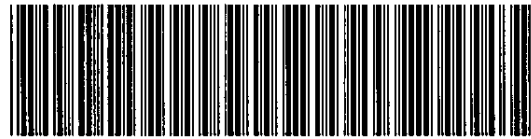
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/28/10
E. DENNARD

Ac

Rivera, Maribel

P02-45138

From: support@floridaincorporator.com
Sent: Wednesday, December 22, 2010 7:31 AM
To: CorpAddressChange
Cc: support@floridaincorporator.com
Subject: BIRKMIRE BEHAVIORAL HEALTHCARE, INC. - P02000045138 - Request for change of business address

To Florida Department of State - Division of Corporations -
corpaddresschange@dos.state.fl.us,

This is a request for change of address for:

Business Name: BIRKMIRE BEHAVIORAL HEALTHCARE, INC.
Document Number: P02000045138

The new business address(es) is/are:

Principal Address

650 SOUTH CENTRAL AVE. - 4000
OVIEDO FL 32765 US

Mailing Address

650 SOUTH CENTRAL AVE. - 4000
OVIEDO FL 32765 US

If you have any questions or concerns, feel free to contact our Support Team
at support@floridaincorporator.com.

Best regards,

Support Team
Florida Incorporator™
Phone: 1-888-800-9573
Fax: 1-800-824-4954
Email: support@FloridaIncorporator.com
<http://www.FloridaIncorporator.com>

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