

PO3000082530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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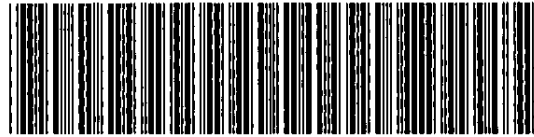
(Business Entity Name)

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PO30000 82530

From: Monica Valle [floridianins@cfl.rr.com]
Sent: Thursday, May 20, 2010 4:30 PM
To: CorpAddressChange
Subject: Floridian Insurance Services, Inc. 20-0117696

To whom it may concern,

Please change the mailing address for Floridian Insurance Services, Inc FEIN # 20-0117696, to the following:

1703 N. Main St. Suite A
Kissimmee, FL 34744

Thank you,

Monica P. Valle

Agency Principal
Floridian Insurance Services, Inc.

