

PO60 00010944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

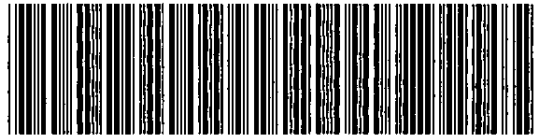
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only

8/17/09  
CW



600159104526

**Murphy, Erin L.**

---

**From:** Lawanda Smith [lsmith3047@yahoo.com]

**Sent:** Friday, August 14, 2009 7:12 PM

**To:** CorpAddressChange

**Subject:** Comfort Care Services Inc. File No.

Mailing Address:  
2902 Motts Cove Hollow  
Lawrenceville, GA 30043

Principal Address Change to:  
8362 Moccasin Trail Drive  
Riverview FL 33578

Document Number P06000010944

FEI/EIN Number 753207233

Date Filed 01/23/2006

State FL

Status ACTIVE

Effective Date 01/22/2006