

PG6000016207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

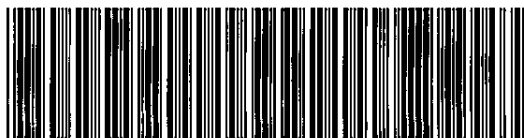
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500155977065

FILED  
09 JUL -7 AM 11:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

my  
7/7/09

July 1st, 2009.

To:  
Florida Department of State  
Division of Corporation  
FAX: 850-245-6897

Dear Madam /Sir:

We would like to ask you, please, to change the following address for the Company:

**OLD MASTER PAINTING & FAUXFINISH, CORP. ( P06000016207 )**

Principal and Mailing Address:

Previous: 7563 Topiary Ave, Boynton Beach, FL 33441.

**Current: 3027 CARAMBOLA CIRCLE S. - COCONUT CREEK, FL 33066.**

Best Regards,

NICK KOSTAS  
President

**FILED**  
**09 JUL -7 11:57**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**