

P091000015475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

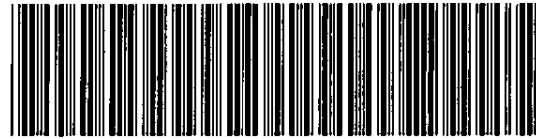
(Business Entity Name)

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E. DENNARD
AK

Malave, Erin

PO9000015475

From: Maylinojeda [maylinojeda@aol.com]
Sent: Sunday, November 07, 2010 9:10 AM
To: CorpAddressChange
Subject: Address change request.

Please make changes to the following corporation.

Chiropractor Medical Services, Inc.

Please change the principal and mailing address to the following address given below.

1490 South Military Trail
Suite # 13 B
West Palm Beach FL, 33415

If any question or other information is needed you can contact me via email or by phone directly to my cell phone at 786-539-6429.

Thank you,

Abel Fleitas/President.