

PO90000 50259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

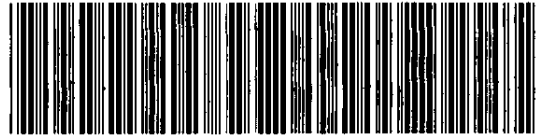
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Malave, Erin M.

From: shai karpf [skarpfdc@yahoo.com]
Sent: Tuesday, January 26, 2010 2:45 PM
To: CorpAddressChange
Subject: Address change

To Whom it May Concern:

This letter is to serve as an address change for NORTH BROWARD CHIROPRACTIC AND WELLNESS CENTER, INC (P09000050259) Filed June 09, 2009. The new address of the business is:

6544 North State Road 7, Coconut Creek, FL 33073.

If you have any further questions please do not hesitate to contact me by cell phone (954) 816-6643.

Shai Karpf, D.C.