## P09000059479

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PiCK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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800159099738

August 04th, 2009.

To:
Florida Department of State
Division of Corporation

Dear Madam /Sir:

FAX: 850-245-6897

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

## MARTINEZ'S HOME INSPECTION SERVICES INC. (P09000059479)

Principal and Mailing Address:

Previous: 8700 W SAPLE R 3 CORAL SPRINGS FL 33065

Current: 8700 W SAMPLE RD APT. 3 CORAL SPRINGS FL 33065.

Best Regards,

Juan Martinez President