

P09000071906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

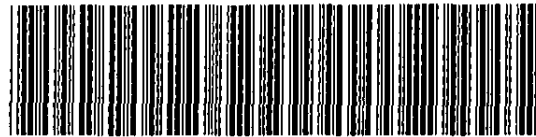
(Business Entity Name)

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**Rivera, Maribel**

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**From:** Staff@adjustercat.com  
**Sent:** Friday, June 10, 2011 2:25 PM  
**To:** CorpAddressChange  
**Subject:** Change of Address Document # P09000071906 Adjuster Cat Claims, Inc.

RE: Document Number: P09000071906  
FEI/EIN Number: 270887617  
Corp: Adjuster Cat Claims, Inc.

Please update our corporate address to:

Adjuster Cat Claims, Inc.  
3409 SW 51<sup>st</sup> Street  
Fort Lauderdale, FL 33312

Thank you,

Adjuster CAT Claims, Inc.  
Office: 954-732-3499  
Fax: 954-416-7002  
Toll Free: 877-767-LOSS  
[www.AdjusterCat.com](http://www.AdjusterCat.com)

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