## P1000006336

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		
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700196006377

04-12-2011 MR-VKL Address Change

## Rivera, Maribel

P100006336

From: Sent:

Jose Zapata [jose304@aol.com] Tuesday, April 12, 2011 10:34 AM

To:

CorpAddressChange

Subject:

Change of small business physical address

Dear Sir or Madam:

Please be kind to assist me in changingthe physical and mailing address, same for both, for my small business asfollow:

Old Address:

JZ Nursing Services, Inc. Tax ID 27-1770200 5804 SW 135th Avenue Miami, Florida 33183

New Address:

JZ Nursing Services, Inc. Tax ID 27-1770200 4500 SW 138th Court Miami, Florida 33175

If a form and a fee would apply, wouldyou please advise as to what form I may use.

Thank you in advance for your promptassistance.

Regards,

Jose Zapata, RN. 4500 SW 138th Court Miami, Florida 33175 786 356-2070