

P10000034810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

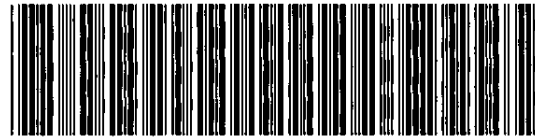
(Business Entity Name)

(Document Number)

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Malave, Erin

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**From:** Patti Martel [pattim@insuresmartpb.com]  
**Sent:** Friday, September 03, 2010 12:28 PM  
**To:** CorpAddressChange  
**Cc:** agents@citizensfla.com  
**Subject:** Niche Insurance Programs, Inc.- Change of physical address & FEIN  
**Importance:** High

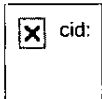
Good afternoon,

Please update our physical location and mailing address: **4480 10<sup>th</sup> Avenue North, Lake Worth, FL 33463**  
and add our Tax ID #: **27-2617241**

Thank you in advance for your prompt attention.

Respectfully,

Patti Martel, Pres.



**Patti Martel, cwcs**  
**Niche Insurance Programs**

**INSURESMART PB**

**4480 10th Avenue North**  
**Lake Worth, FL 33463**  
**561.968.8600 Office**  
**561.634.1511 Cell**  
**561.968.8866 Fax**

[pattim@insuresmartpb.com](mailto:pattim@insuresmartpb.com)