

P/000005/7/5

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

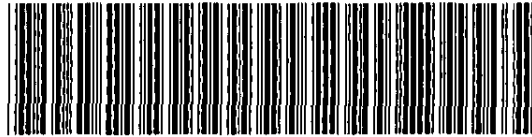
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

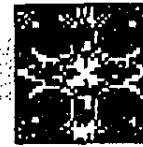
Special Instructions to Filing Officer:

Office Use Only



900188818719

Address Change  
Tewis  
1-18-11



**IM CREDIT SOLUTION  
& GRANT WRITER  
CONSULTANT**

7300 POMELO DR.  
ORLANDO, FLORIDA 32819  
407-242-3026/321-229-0694

Department Of State  
Division of Corporations

Corporate Document Supervisor  
P.O. Box 6327  
Tallahassee, FL 32314

January 18, 2011

Please be advised that the address of records should be changed to the following:  
IM Credit Solution & Grant Writer Consultant  
927 S. Goldwyn Ave.  
Suite 230  
Orlando, FL 32805

Please advise us if there is any additional information needed to update the address.

Sincerely,

James H. Stewart  
Office Manager