# P1000060174

(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



100185575601

E. DENNARD

#### Malave, Erin

From: LACIMA Insurance Agency [lacimainsurance@gmail.com]

Sent: Thursday, September 02, 2010 6:40 PM

To: CorpAddressChange

Subject: Change of Address/ Add FEIN Number

#### Florida Profit Corporation

LACIMA INSURANCE AGENCY INC.

#### Filing Information

**Document Number P10000060174** 

FEI/EIN Number

NONE

**Date Filed** 

07/21/2010

State

FL

Status

**ACTIVE** 

**Effective Date** 

07/21/2010

#### **Principal Address**

12381 SOUTH ORANGE BLOSSOM TRAIL ORLANDO FL 32837

#### **Mailing Address**

12381 SOUTH ORANGE BLOSSOM TRAIL ORLANDO FL 32837

# PLEASE CHANGE PRINCIPAL ADDRESS AND MAILING ADDRESS TO:

771 S KIRKMAN ROAD SUITE 110 ORLANDO, FL 32811

## PLEASE ADD FEIN NUMBER:

27-3134383

### **THANK YOU**