## P97000104622

(Requestor's Name)		
(Address)		
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(City/S	State/Zip/Phone	∍ #)
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PICK-UP	☐ WAIT	MAIL
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(Business Entity Name)		
(Document Number)		
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Special Instructions to Fill	ing Officer:	•

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## Malave, Erin

From:

ngoswami@cfl.rr.com

Sent:

Wednesday, June 30, 2010 6:00 PM

To: Subject: CorpAddressChange P97000104622

Dear Sir or Madam:

I would like to change the physical address and mailing address of my corporation, Nishco Flospitality Inc. (document # P97000104622). The new physical address should be as follows: 850 S US Hwy 27/441 Lady Lake, Fl. 32159. The mailing address should be changed to the following: P.O. Box 669 Plymouth, Fl. 32768.

Thank you,

Nishikant Goswami 407-880-2282