

P980000 43088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

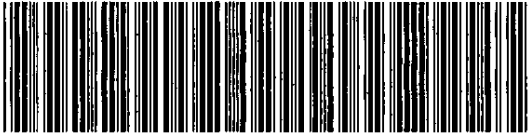
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700161328997

EM
7/28

To: corpaddresschange@dos.state.fl.us

Page 1 of 1



[Print] [Close]

P98000043088

From: jorgehernandezmd@bellsouth.net
To: corpaddresschange@dos.state.fl.us
Cc: jorgehernandezmd@bellsouth.net
Subject: Change to Tax ID #
Date: Tuesday, September 8, 2009 10:09:22 AM

September 8, 2009

I am requesting a change to our tax id#

~~Wrong# 592913547~~

Correct# 593508768

Thank you for your immediate attention to this matter
You can contact me if needed at 407-895-9060

Thank you

Ruth Balsler
Office Manager