P09000052547

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	<u> </u>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
. (Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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1210912010 M. R.WEA AC

Malave, Erin

From: Accounting Department [accounting@psoria-shield.com]

Sent: Tuesday, December 07, 2010 10:05 AM

To: CorpAddressChange
Subject: Address Change

Please update the address for Psoria Shield Inc (Doc # P09000052547) to the current address

below:

6408 W Linebaugh Ave Suite 104 Tampa, FL 33625

Thank you, Jennifer Rolle Executive Coordinator 813-362-4233