

F14000002908

(Requestor's Name)

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(Address)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
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*[Signature]*  
NOV 18 2014

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** United Hands Services, Inc.

Name of Corporation

**DOCUMENT NUMBER:** F14000002908

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Ann Burnett**

Name of Contact Person

Firm/Company

**1740 SE 18 Street, Suite #901**

Address

**Ocala, FL 34471**

City/State and Zip Code

**UnitedHands@Hotmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Ann Burnett**

Name of Contact Person

at ( **352** ) **873-3540**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Ohio in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: United Hands Services, Inc
- 2. The principal office address: 1689 Bide-A-Wee Park, Columbus, Ohio 43205
- 3. The mailing address (if different): 1740 SE 18 Street, Suite 901, Ocala, FL 34471
- 4. Date of incorporation/qualification: May 13, 2014 Document number: 201413301255
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

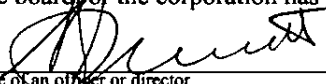
Michael J. Cooper  
321 NW 3rd Ave  
Ocala, FL 34475

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Ann Burnett  
1740 SE 18 Street, Suite 901  
P.O. Box NOT acceptable  
Ocala, FL 34471

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board of the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Ann Burnett, VP/ Board Chair  
\_\_\_\_\_  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
\_\_\_\_\_  
Signature of Registered Agent

October 29, 2014  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

United Hands Services, Inc  
\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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TALLAHASSEE, FLORIDA

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