

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000109623

**FILED**  
**Jan 26, 2008**  
**Secretary of State**

**Entity Name:** C & W HELP UNLIMITED, LLC

**Current Principal Place of Business:**

P.O. BOX 244611  
BOYNTON BEACH, FL 33424

**New Principal Place of Business:**

5037 ASHLEY LAKE DRIVE  
135  
BOYNTON BEACH, FL 33437

**Current Mailing Address:**

P.O. BOX 244611  
BOYNTON BEACH, FL 33424

**New Mailing Address:**

5037 ASHLEY LAKE DRIVE  
APT 135  
BOYNTON BEACH, FL 33437

**FEI Number:** 20-3716471      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

WILSON, DWIGHT  
PO BOX 244611  
BOYNTON BEACH, FL 33424      US

**Name and Address of New Registered Agent:**

WILSON, DWIGHT  
5037 ASHLEY LAKE DRIVE  
APT 135  
BOYNTON BEACH, FL 33437      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** DWIGHT WILSON

01/26/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** WILSON, DWIGHT  
**Address:** P.O. BOX 244611  
**City-St-Zip:** BOYNTON BEACH, FL 33424

**Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES:**

**Title:** RA      (X) Change ( ) Addition  
**Name:** WILSON, DWIGHT T CEO  
**Address:** 5037 ASHLEY LAKE DRIVE APT 135  
**City-St-Zip:** BOYNTON BEACH, FL 33437

**Title:** MGR      ( ) Change (X) Addition  
**Name:** WILLIAMS, DEMETREUS C MGR  
**Address:** 5037 ASHLEY LAKE DRIVE APT 135  
**City-St-Zip:** BOYNTON BEACH, FL 33437

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** DEMETREUS WILLIAMS

MGR

01/26/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date