2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000073206

Entity Name: MANNY HANDYMAN SOLUTIONS LLC

FILED Oct 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 160743 SUITE160743

ALTAMONTE SPRINGS, FL 32716-074 ALTAMONTE SPRINGS, FL 32716-074

Current Mailing Address: New Mailing Address:

P.O. BOX 160743

ALTAMONTE SPRINGS, FL 32716-074

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

SHAHAF, MENASHE MR. SHAHAF, MENASHE MR.

204 CAMDEN ROAD SUITE160743

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32716-074 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: MENASHE SHAHAF 10/09/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 SHAHAF, MENASHE MR.
 Name:

 Address:
 P.O. BOX 160743
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32716-074
 City-St-Zip:

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: MENASHE SHAHAF MR 10/09/2007