PHW 59725

(Re	questors Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
`		





200234977692

05/16/12--01009--015 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Andy the Handyman, Inc.	
Name of Corporation	
DOCUMENT NUMBER: P04000059775	····
The enclosed Statement of Change of Registered Office/Agent and fee are submit	ted for filing.
Please return all correspondence concerning this matter to the following:	
Andrea Wiggers	
Andrea Wiggers Name of Contact Person	
Andy the Handyman, Inc.	
Firm/Company	··
P O Box 320747	•
Address	
Cocoa Beach, FL 32932-0747	
City/State and Zip Code	
Avwiggers@aol.com E-mail address: (to be used for future annual report notif	instina)
E-mail address. (to be used for future atmust report notif	ication)
For further information concerning this matter, please call:	
Andrea Wiggers at (321)	506-3463
Name of Contact Person Area Code & Daytin	me Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.	•
Mailing Address: Amendment SectionStreet Address: Amendment SectionDivision of CorporationsDivision of CoP.O. Box 6327Clifton BuildinTallahassee, FL 323142661 Executive	rporations ng

Tallahassee, FL 32301

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

statement of cha	nge is submitted for a corp	oration organize	607.1508, or 617.1508, Flo d under the laws of the Stat d agent, or both, in the Stat	e of Florida	
	he corporation: Andy th				
2. The principal	office address: 126 DeLo	eon Rd, Coco	a Beach, FL 32931		
3. The mailing a	ddress (if different): PO	Box 320747,	Cocoa Beach, FL 329	32-0747	_
4. Date of incorp	poration/qualification:	4/5/2004	Document number:	P04000059775	
	I street address of the curre tment of State: (If resigned		nt and registered office on fi	ile with the	
	Andrea Wiggers				
	126 DeLeon Rd				
	Cocoa Beach, FL 32	931		201 3AL	
6. The name and (if changed):	street address of the new i	registered agent (if changed) and /or registere	ed office HAY I	ed and a second
	Edgard de Cuba				Ī
	126 DeLeon Rd				man of
	Cocoa Beach, FL 32	P.O. Box NOT ac	eceptable	Pr #	
The street address changed will	ess of its registered office be identical.	and the street ad	dress of the business office	e of its registered agent,	
Such change wa authorized by th	as authorized by resolution ne board, or the corporatio	n duly adopted bon has been notif	y its board of directors or lied in writing of the chang	by an officer so	
Madre	e of an officer or director	· .	Andrea Wiggers, Di	irector/President	
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as regist o comply with the provisi d I am familiar with and a ng filed merely to reflect a poeen notified in writing a	ered agent and a ons of all statute accept the obliga a change in the r of this change.	agree to act in this capacit s relative to the proper an ation of my position as regi egistered office address, I	y. d complete performance istered agent. Or, if this hereby confirm that the	
Sign	nature of Registered Agent	la	5/14/20)12	
	half of an entity:		2		
Ty	ped or Printed Name	· ·			

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