

PO4000059725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

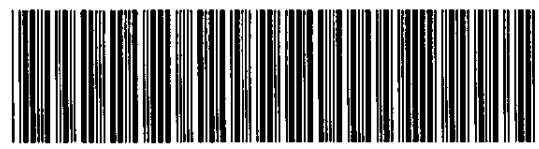
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2012 MAY 16 AM 9:44

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*Chang*  
*5/16/12*

**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 submitted for filing.  
Please return all correspondence concerning this matter to the following:

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

Awiggers@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrea Wiggers at ( 321 ) 506-3463  
Name of Contact Person 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Andy the Handyman, Inc.
2. The principal office address: 126 DeLeon Rd, Cocoa Beach, FL 32931
3. The mailing address (if different): P O Box 320747, Cocoa Beach, FL 32932-0747
4. Date of incorporation/qualification: 4/5/2004 Document number: P04000059775
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)

Andrea Wiggers  
126 DeLeon Rd  
Cocoa Beach, FL 32931

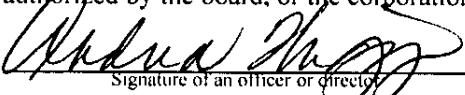
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Edgard de Cuba  
126 DeLeon Rd  
P.O. Box NOT acceptable  
Cocoa Beach, FL 32931

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TALLAHASSEE, FLORIDA

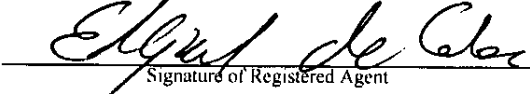
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

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

Andrea Wiggers, Director/President  
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

5/14/2012  
Date

If signing on behalf of an entity:  
\_\_\_\_\_  
Typed or Printed Name

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