

2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000055882

FILED
Sep 29, 2010
Secretary of State

Entity Name: A TEACHER'S HELPING HAND, LLC

Current Principal Place of Business:

504 POOL BRANCH RD
FT. MEADE, FL 33841 US

New Principal Place of Business:

403 L LANIER ROAD
FT. MEADE, FL 33841 US

Current Mailing Address:

PO BOX 1626
HIGHLAND CITY, FL 338461626

New Mailing Address:

FEI Number: 32-0229450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HELVESTON, PAMELA
504 POOL BRANCH RD
FT. MEADE, FL 33841 US

Name and Address of New Registered Agent:

CRUM, ANGEL
403 L LANIER ROAD
FT. MEADE, FL 33841 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: ANGEL CRUM

09/29/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: CRUM, ANGEL
Address: 403 L LANIER ROAD
City-St-Zip: FORT MEADE, FL 33841 US

Title: MGR
Name: HELVESTON, PAMELA
Address: 504 POOL BRANCH ROAD
City-St-Zip: FORT MEADE, FL 33841 US

I hereby 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: ANGEL CRUM

OWNE

09/29/2010

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