I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: DEBBIE NORMAN

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N1000005397

Entity Name: HEAVENLY HANDS FOR CHARITIES, INC.

Current Principal Place of Business:

1247 LAURA STREET CASSELBERRY, FL 32707

Current Mailing Address:

109 LIVE OAK BLVD. #181127 CASSELBERRY, FL 32718 US

FEI Number: 35-2386617

Name and Address of Current Registered Agent:

NORMAN, DEBBIE 1247 LAURA STREET CASSELBERRY, FL 32707 US FILED May 30, 2023 Secretary of State 4042402173CC

Certificate of Status Desired: No

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	E: DEBBIE NORMAN			05/30/2023	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	ED	Title	PD		
Name	VALLES, MARY LOU	Name	NORMAN, DEBBIE		
Address	888 SPANISH MOSS DRIVE	Address	1247 LAURA STREET		
City-State-Zip:	CASSELBERRY FL 32707	City-State-Zip:	CASSELBERRY FL 32707		
Title	D	Title	PR		
Name	PAPAGEORGIOU, DENISE	Name	BARDONNEX, DEBORAH		
Address	6015 FOREST CITY RD.	Address	347 ORANGE AVENUE		
City-State-Zip:	ORLANDO FL 32810	City-State-Zip:	LONGWOOD FL 32750		
Title	ES				
Name	JIMENEZ, WILFRED				
Address	5549 MICHELLE AVENUE				
City-State-Zip:	ORLANDO FL 32810				

05/30/2023

Date