# 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: BRITTANY AXELSON

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N22000006348

Entity Name: HUMANITY HELPS INCORPORATED

#### Current Principal Place of Business:

3590 15TH AVE SW NAPLES, FL 34117

### **Current Mailing Address:**

3590 15TH AVE SW NAPLES, FL 34117 US

### FEI Number: 88-2575183

## Name and Address of Current Registered Agent:

AXELSON, BRITTANY 3590 15TH AVE SW NAPLES, FL 34117 US

Date

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:

Electronic Signature of Registered Agent

### Officer/Director Detail :

Title	S	Title	Т
Name	ORCUTT-ANGIUS, JENNIFER	Name	RUDOLPH, KAITLYN
Address	25540 FENNER CIRCLE	Address	4830 WINDSOR LANDING DR UNIT
City-State-Zip:	BONITA SPRINGS FL 34135	City-State-Zip:	208 FORT MYERS FL 33966
Title	Ρ	Titlo	
Title Name	P AXELSON, BRITTANY	Title	VP
	•	Title Name Address	VP AXELSON, ROBERT FRANKLIN 3590 15TH AVE SW

03/06/2023

Date