

2015 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P13000007806

Entity Name: LUCAS CARING HANDS INC.

Current Principal Place of Business:

10975 CAMPUS HEIGHTS LANE
JACKSONVILLE, FL 32218

Current Mailing Address:

10975 CAMPUS HEIGHTS LANE
JACKSONVILLE, FL 32218

FEI Number: 46-2770575

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUCAS, GLADYS
10975 CAMPUS HEIGHTS LN
JACKSONVILLE, FL 32218 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: GLADYS LUCAS

10/15/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name LUCAS, GLADYS Y
Address 10975 CAMPUS HEIGHTS LN
City-State-Zip: JACKSONVILLE FL 32218

Title VP
Name LUCAS, MONTREZ
Address 10975 CAMPUS HEIGHTS LN
City-State-Zip: JACKSONVILLE FL 32218

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GLADYS LUCAS

10/15/2015

Electronic Signature of Signing Officer/Director Detail

Date