

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000006654

Entity Name: HANDY WORKS PLUS LLC

FILED
Sep 28, 2007
Secretary of State

Current Principal Place of Business:

120 EAST MARIANA AVE.
NORTH FT. MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

120 EAST MARIANA AVE.
NORTH FT. MYERS, FL 33917

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ANGEVINE, STEPHEN R
120 EAST MARIANA AVE.
NORTH FT. MYERS, FL 33917 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: STEPHEN R. ANGEVINE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ANGEVINE, STEPHEN R
Address: 120 EAST MARIANA AVE.
City-St-Zip: NORTH FT. MYERS, FL 33917

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ANGEVINE, STEPHEN R
Address: 120 EAST MARIANA AVE.
City-St-Zip: NORTH FT. MYERS, FL 33917

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: STEPHEN R ANGEVINE

MR.

09/28/2007

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