2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 04, 2008
Secretary of State

DOCUMENT# L07000053563

Entity Name: HANDS OF LIGHT HEALING LLC

Current Principal Place of Business:

4085 HANCOCK BRIDGE PARKWAY, SUITE 111-378
NORTH FT. MYERS, FL 33903

New Principal Place of Business:

1718 CAPE CORAL PARKWAY EAST
CAPE CORAL, FL 33904

Current Mailing Address:

4085 HANCOCK BRIDGE PARKWAY, SUITE 111-378
NORTH FT. MYERS, FL 33903

New Mailing Address:

4534 ORANGE GROVE BLVD
NORTH FT. MYERS, FL 33903

FEI Number: 22-3964569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: RA

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: LEON, JOHANNA
Address: 4085 HANCOCK BRIDGE PARKWAY, SUITE 111-378
City-St-Zip: NORTH FT. MYERS, FL 33903

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LEON, JOHANNA
Address: 4534 ORANGE GROVE BLVD
City-St-Zip: NORTH FT. MYERS, FL 33903

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: JOHANNA LEON PR 11/04/2008

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