

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000027285

**FILED**  
**Oct 10, 2013**  
**Secretary of State**

**Entity Name:** HELPING HANDS OF THE PALM BEACHES, LLC

**Current Principal Place of Business:**

664 GAZETTA WAY  
WEST PALM BEACH, FL 33413

**New Principal Place of Business:**

3152 N JOG RD  
10107  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

664 GAZETTA WAY  
WEST PALM BEACH, FL 33413

**New Mailing Address:**

3152 N JOG RD  
10107  
WEST PALM BEACH, FL 33411

**FEI Number:** 26-2441017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KELSH, KATHARINE E  
664 GAZETTA WAY  
WEST PALM BEACH, FL 33413 US

**Name and Address of New Registered Agent:**

KELSH, KATHARINE E  
3152 N JOG RD  
10107  
WEST PALM BEACH, FL 33411 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: KATHARINE KELSH

10/10/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KELSH, KATHARINE E  
Address: 3152 N JOG RD 10107  
City-St-Zip: WEST PALM BEACH, FL 33411

I hereby 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: KATHARINE KELSH

MGRM

10/10/2013

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