

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000039124

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Entity Name:** CALL-A- HAND SERVICES LLC

**Current Principal Place of Business:**

2 SOUTH CUMBERLAND STREET  
OCOE, FL 34761 US

**New Principal Place of Business:**

905 STARKE LAKE CIRCLE  
OCOE, FL 34761 US

**Current Mailing Address:**

2 SOUTH CUMBERLAND STREET  
OCOE, FL 34761 US

**New Mailing Address:**

905 STARKE LAKE CIRCLE  
OCOE, FL 34761 US

**FEI Number:** 27-2350650

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CALLAHAN, TRACY  
404 MAGNOLIA STREET  
WINTER GARDEN, FL 34787 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: TRACY CALLAHAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CALLAHAN, TRACY  
Address: 905 STARKE LAKE CIRCLE  
City-St-Zip: OCOE, FL 34761 US

Title: MGRM  
Name: CALLAHAN, BILLY  
Address: 905 STARKE LAKE CIRCLE  
City-St-Zip: OCOE, FL 34761 US

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: TRACY CALLAHAN

MRS

03/23/2012

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