

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, Florida 32301 (850) 681-6528

HOLD FOR PICKUP BY UCC SERVICES CE USE ONLY

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Handex of Pennsylvania, LLC.

Filing Evidence		Type of Document ☐ Certificate of Status ☐ Certificate of Good Standing 3
☐ Certified Copy		And the state of t
		☐ Articles Only ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
		☐ All Charter Documents to finclude
Retrieval Request		Articles & Amendments S
☐ Photocopy		☐ Fictitious Name Certificate
☐ Certified Copy	÷	Other San Bridge
NEW FILINGS	AMENDMENTS	
Profit	Amendment	7
Non Profit	Resignation of R	A Officer/Director

	Profit
	Non Profit
	Limited Liability
	Domestication
X	Other - Chg of Agt.

OTHER FILINGS
Annual Reports
Fictitious Name
Name Reservation
Reinstatement

AMENDMENTS
Amendment
Resignation of RA Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

	7000	04844	7877
REGIS	TRATION/QUALIFICATION *	71/30/02↓ ≱**515.00	#####25.00
Foreign	l		
Limited	l Liability		
Reinsta	tement		n
Tradem	ıark		D-07/
Other] "	30

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

2. The mailing addre	ss of the limited liabi	lity company is	: <u>30941 Suneag</u>	ile Dr. Mt Dora	a, FL 32757	<u> </u>
12/19/00			Management		-	 ·
3. Date of filing/regis	stration in Florida		M000000026			
5. The name of the reg Florida Department	gistered agent and the	registered offic	4. Documen		ecords of the	
	Bill Tabor					
	30941 Suneagle D	Name Or	at-			
		Address				
	Mt Dora, FL 32757	7 City, State and	7:			-
6. The name and addre						
6. The name and addre	ess of the new register	ed agent and/or	office:		25 PS	
	NRAI Services, Inc.	_				
		Name				2
	526 E. Park Avenue)			N 30 PM	
	Florida street add	dress (P.O. Box	NOT acceptabl	le)	TE D	mark part of
	Tallahassee	FL 3230				
	Cit	ty, State and Zi	ρ			
If the limited liability confirmed that after the confirmed that after the and the business office diability company, it is he members of the limithe operating agreement	of the registered agent ereby confirmed that ted liability company of the limited liabilit	t will be identice the change(s) of or as otherwise by company.	cal. Or, in the cawas/were authority	ess of the reg	ustered office da limited	
Signature of a member or auth-	orized representative of a me	mber)		-		
Villiam E. Tabor, Jr. Printed or typed name of signer	e)	<u> </u>		W WAYE -		
hereby accept the appe omply with the provisio nd I am familiar with a hapter 608, F.S. Or, if ddress, I hereby confirm RAI Services. Inc.		l agent and agr tive to the prop ions of my posi	ee to act in this er and complete ion as registered by reflect a char	capacity. I f performanc d agent as pr	urther agree e of my dutie rovided for ir	to es,

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00