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COVER LETTER

TO: Amendment Section Division of Corporations

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SUBJECT: 2 Helping Hands, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P07000046290

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard Jensen

(Name of Contact Person)

2 Helping Hands, Inc.

(Firm/Company)

13446 Heald Lane 4B

(Address)

Fort Myers, Florida 33908

(City/State and Zip Code)

For further information concerning this matter, please call:

 Karen Jensen
 at (239)
 274-7796

 (Name of Contact Person)
 (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: 2 Helping Hands, Inc.

2. The principal office address: <u>13446 Heald Lane 4B</u> Fort Myers, Florida 33908

3. The mailing address (if different):

4. Date of incorporation/qualification: 4/16/2007 Document number: P07000046290

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Richard Jensen

13446 Heald Lane 4B

Fort Myers, Florida 33908

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Karen Jensen	HĄ	ETA	Ę.	Т
13446 Heald Lane 4B		RY Y	22	Landa and a state of the state
(P.O. Box NOT acceptable)	الم	- -	Å	m
Fort Myers, Florida 33908		~ '	<u>ب</u> د	0
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

(Signature of an officer or director)

Richard Jensen - Registered Agent (Printed or typed hame and tille)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

If signing on behalf of an entity:

(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

9-18-05 (Date)

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