

**2020 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N17000009397

**Entity Name:** VALMYRES HELPING HANDS INC.

**Current Principal Place of Business:**

2908 WOODBRIDGE CROSSING CT  
GREEN COVE SPRINGS, FL 32043

**Current Mailing Address:**

PO BOX 382207  
MIAMI, FL 33238 US

**FEI Number:** 82-2844972

**Certificate of Status Desired:** Yes

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

VALMYRE, MAGALIE  
1941 NW 79TH ST  
MIAMI, FL 33147 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:** MAGALIE VALMYRE

03/11/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name VALMYRE, MAGALIE  
Address PO BOX 382207  
City-State-Zip: MIAMI FL 33238

Title VP  
Name VALMYR, OLANAUD  
Address 2908 WOODBRIDGE CROSSING CT  
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title AA  
Name SMITH, CHRISTINE  
Address 620 S.PARK ROAD APT 211  
City-State-Zip: HOLLYWOOD FL 33021

Title SEC  
Name VALMYRE, MARGARETTE  
Address 1398 NW 55 TERRACE APT A  
City-State-Zip: MIAMI FL 33142

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MAGALIE VALMYRE

**PRESIDENT**

03/11/2020

Electronic Signature of Signing Officer/Director Detail

Date