

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000186980

**Entity Name:** LENDING A HELPING HAND, BY KAREN LLC

**Current Principal Place of Business:**

100 KNIGHT WAY  
APT 106  
FAYETTEVILLE, GA 30214

**Current Mailing Address:**

100 KNIGHT WAY  
APT 106  
FAYETTEVILLE, GA 30214 US

**FEI Number:** 47-5073392

**Certificate of Status Desired:** No

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

FRANCIS, KAREN  
1690 DUNN AVENUE  
APT 1022  
DAYTONA BEACH, FL 32114 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FRANCIS, KAREN  
Address 100 KNIGHT WAY  
APT. 106  
City-State-Zip: FAYETTEVILLE GA 30124

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KAREN FRANCIS

**MANGER**

**04/15/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date