## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000039298

Entity Name: RESTORATIVE HANDS LLC

**Current Principal Place of Business:** 

2587 S SEMORAN BLVD 1837 ORLANDO, FL 32822

**Current Mailing Address:** 

2587 S SEMORAN BLVD 1837 ORLANDO, FL 32822 US

FEI Number: 82-0629344 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOWARD, JONATHAN 11125 SW 157 TERR MIAMI, FL 33157 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: JONATHAN HOWARD 06/20/2020

Electronic Signature of Registered Agent

Date

**FILED** Jun 20, 2020

**Secretary of State** 

0593613425CC

## Authorized Person(s) Detail:

**OWNER** Title

MORRISON, VINROY JR. Name Address 2587 S SEMORAN BLVD

1837

ORLANDO FL 32822 City-State-Zip:

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: MORRISON, VINROY, JR.

**OWNER** 

06/20/2020 Date