# 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: PAUL EAST OWNER

Electronic Signature of Signing Authorized Person(s) Detail

# DOCUMENT# L24000108027

#### Entity Name: HANDYMAN PAUL OF SOUTH FLORIDA LLC

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### **Current Principal Place of Business:**

7664 NW 5TH ST APT 2C BLDG 6 PLANTATION. FL 33324

# **Current Mailing Address:**

7664 NW 5TH ST APT 2C BLDG 6 PLANTATION. FL 33324 US

## FEI Number: 99-1787618

### Name and Address of Current Registered Agent:

EAST, PAUL 7664 NW 5TH ST APT 2C BLDG 6 PLANTATION, FL 33324 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:

Title	PRESIDENT	Title	VP
Name	EAST, PAUL	Name	EAST, MARVALEE
Address	7664 NW 5TH ST APT 2C BLDG 6	Address	7664 NW 5TH ST APT 2C BLDG 6
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL 33324

Date Electronic Signature of Registered Agent Authorized Person(s) Detail :

04/28/2025

#### FILED Apr 28, 2025 Secretary of State 3787735384CC

Certificate of Status Desired: No

Date