2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000013959

Entity Name: ALL ABOUT HEALING LLC

FILED Mar 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5785 LAUDERDALE DRIVE 115 MARGARET ST CINCINNATI, OH 45239

STEC

BRANDON, FL 33511

Current Mailing Address: New Mailing Address:

5785 LAUDERDALE DRIVE 115 MARGARET ST CINCINNATI, OH 45239

STEC

BRANDON, FL 33511

FEI Number: 86-1141190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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: PETER SOUZA

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: MGRM () Delete (X) Change () Addition

SIMON, DARLA Name: SIMON, DARLA Name: Address: 5785 LAUDERDALE DRIVE Address: 115 MARGARET ST City-St-Zip: CINCINNATI, OH 45239 City-St-Zip: BRANDON, FL 33511

(X) Change () Addition Title: MGRM () Delete Title: MGRM

KIRKLAND, MICHELLE Name: Name: KIRKLAND, MICHELLE Address: 15 RICHMOND ROAD Address: 115 MARGARET ST City-St-Zip: WEST CHESTER, OH 45069 City-St-Zip: BRANDON, FL 33569

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: DARLA SIMON 03/12/2007