

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000011541

FILED  
Nov 12, 2009  
Secretary of State

Entity Name: SHARING IS CARING INC.

**Current Principal Place of Business:**

191 N. HIBISCUS DR  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

191 N. HIBISCUS DR  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 26-3930525      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

SWIMMER, AARON  
1680 MICHIGAN AVE  
STE 1014  
MIAMI BEACH, FL 33139 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: AARON SWIMMER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete  
Name: MARDEN, JONATHAN  
Address: 191 N. HIBISCUS DR  
City-St-Zip: MIAMI BEACH, FL 33139

Title: CMO ( ) Delete  
Name: MAASS, NATHALIE  
Address: 888 BISCAYNE BLV. # 4905  
City-St-Zip: MIAMI, FL 33132

Title: CFO ( ) Delete  
Name: MARDEN, JONATHAN  
Address: 191 HIBISCUS DR  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JONATHAN MARDEN

CEO

11/12/2009

Electronic Signature of Signing Officer or Director

Date