2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000008121

Entity Name: THE FLOWERING ATTIC AGENCY INC

FILED May 04, 2012 Secretary of State

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

1439 SUNNINGDALE WAY 3674 OKEECHOBEE CIR ORLANDO, FL 32828 CASSELBERRY, FL 32707

Current Mailing Address: New Mailing Address:

PO BOX 780036

ORLANDO, FL 328780036 US

FEI Number: 27-0759948 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MCNEIL-SMITH, LORIA

1439 SUNNINGDALE WAY

ORLANDO, FL 32828 US

MCNEIL-SMITH, LORIA

3674 OKEECHOBEE CIR

CASSELBERRY, FL 32707 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: LORIA MCNEIL SMITH 05/04/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

 Name:
 MCNEIL-SMITH, LORIA

 Address:
 3674 OKEECHOBEE CIR

 City-St-Zip:
 CASSELBERRY, FL 32707 US

Title: D

 Name:
 SMITH, TORANTO

 Address:
 3674 OKEECHOBEE CIR

 City-St-Zip:
 CASSELBERRY, FL 32707

Title:

Name: COBARRIS, GINA

Address: 3300 WEST SOUTH STREET City-St-Zip: ORLANDO, FL 32805 US

Title:

 Name:
 ORJI, EZEKIEL PHD

 Address:
 1112 SW 129TH PLACE

 City-St-Zip:
 MIAMI, FL 33186 US

Title: D

 Name:
 PHILLIPS, ALICIA

 Address:
 2830 HANCOCK DR

 City-St-Zip:
 TITUSVILLE, FL 32780 US

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 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 all other like empowered.

SIGNATURE: LORIA MCNEIL SMITH P 05/04/2012