2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000081769

Entity Name: STITCHING AROUND, INC.

FILED Mar 30, 2009 Secretary of State

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

4862 SW 72 AVENUE MIAMI, FL 33155

Current Mailing Address: New Mailing Address:

4862 SW 72 AVENUE MIAMI, FL 33155

FEI Number: 20-3096668 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:

HOULIHAN, GERALD J 701 BRICKELL AVENUE - SUITE 1900

701 BRICKELL AVENUE - SUITE 1900 MIAMI, FL 33131 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.

HOULIHAN, GERALD J

MIAMI, FL 33156 US

9130 SO. DADELAND BOULEVARD TWO DATRAN CENTER, SUITE 1209

SIGNATURE: GERALD J. HOULIHAN 03/30/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 KITCHENS, CLAUDIA C
 Name:
 KITCHENS, CLAUDIA C

 Address:
 5191 SW 76 STREET
 Address:
 7116 SW 48 LANE

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 MIAMI, FL 331555603

Title: VP () Delete Title: VP (X) Change () Addition Name: HOULIHAN, GERALD J Name: KITCHENS, COLLEEN R

 Name:
 HOULIHAN, GERALD J
 Name:
 KITCHENS, COLLEEN

 Address:
 5191 SW 76 STREET
 Address:
 7116 SW 48 LANE

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 MIAMI, FL 331555603

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

 Name:
 KITCHENS, COLLEEN R
 Name:

 Address:
 100 EDGEWATER DRIVE, APT. 340
 Address:

 City-St-Zip:
 MIAMI, FL 33133
 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLAUDIA C. KITCHENS P 03/30/2009