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.

VICE PRESIDENT

SIGNATURE: MICHAEL TRUFFA

I

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# N15000005480

Entity Name: STITCHES FROM THE HEART SEAMS INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

12812 LONGCREST DR RIVERVIEW, FL 33579

# **Current Mailing Address:**

12812 LONGCREST DR RIVERVIEW, FL 33579 US

## FEI Number: 47-4204971

### Name and Address of Current Registered Agent:

MICHAEL, TRUFFA 12812 LONGCREST DR RIVERVIEW, FL 33579 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.

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Secretary of State 5555153468CC

FILED Jan 31, 2024

Certificate of Status Desired: No

Date

01/31/2024