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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

CEO

SIGNATURE: SONJA BLEHER

Electronic Signature of Signing Officer/Director Detail

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000016397

Entity Name: INNOVATE YOUR LIFE, INC.

Current Principal Place of Business:

581 NORTH PARK AVENUE UNIT 117 APOPKA, FL 32704

Current Mailing Address:

581 NORTH PARK AVENUE UNIT 117 APOPKA, FL 32704 US

FEI Number: 27-5082330

Name and Address of Current Registered Agent:

BLEHER, JUDITH 581 NORTH PARK AVENUE UNIT 117 APOPKA, FL 32704 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Р	Title	SEC
Name	BLEHER, SONJA	Name	BLEHER, JUDITH
Address	581 NORTH PARK AVENUE UNIT 117	Address	581 NORTH PARK AVENUE UNIT 117
City-State-Zip:	APOPKA FL 32704	City-State-Zip:	APOPKA FL 32704

fice or registered agent, or both, in the State of Florida.

Certificate of Status Desired: Yes

FILED Apr 19, 2021 Secretary of State 9004928518CC

04/19/2021

Date