that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CSISZER, RONALDO

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L1600008115 Entity Name: PERFORMANCE SCIENCE NUTRITION USA, LLC

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

2550 NW 72ND AVENUE, SUITE 301 MIAMI, FL 33122

Current Mailing Address:

2550 NW 72ND AVENUE, SUITE 301 MIAMI. FL 33122

FEI Number: 81-1141488

Name and Address of Current Registered Agent:

LYNCOLN EXPORTS, INC. 2550 NW 72ND AVENUE, SUITE 301 MIAMI, FL 33122 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

Authorized Person(s) Detail :

Title	MBR	Title	MBR
Name	CSISZER, RONALDO	Name	LYNCOLN EXPORTS, INC.
Address	2550 NW 72ND AVENUE, SUITE 301	Address	2550 NW 72ND AVENUE, SUITE 301
City-State-Zip:	MIAMI FL 33122	City-State-Zip:	MIAMI FL 33122

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

MBR

04/25/2017 Date

FILED Apr 25, 2017 Secretary of State CC9914226583

Certificate of Status Desired: No

Date