FEI Number: 46-2191839 Name and Address of Current Registered Agent:		Certificate of Status Desir	ed: Yes	
CARLIN, TOM 28059 US HIGHWAY 19 N STE 300 CLEARWATER, FL 33761 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.				
nie abore namea		ierea eniee er regie	<b>J , , , , , , , , , ,</b>	
	: TOM CARLIN	lored ennee er regie	0	04/14/2020
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0	
	: TOM CARLIN Electronic Signature of Registered Agent		0	04/14/2020
SIGNATURE	: TOM CARLIN Electronic Signature of Registered Agent	Title	0	04/14/2020
SIGNATURE Officer/Direc	TOM CARLIN Electronic Signature of Registered Agent Control Detail:			04/14/2020

DOCUMENT# F17000002009

Entity Name: PROBALANCE, INC.

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

28059 US HIGHWAY 19 N STE 300 CLEARWATER, FL 33761

#### **Current Mailing Address:**

28059 US HIGHWAY 19 N STE 300 CLEARWATER, FL 33761 US

## F

#### N

City-State-Zip: CLEARWATER FL 33761

### 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.

#### SIGNATURE: THOMAS CARLIN

Electronic Signature of Signing Officer/Director Detail

FILED Apr 14, 2020 Secretary of State 2946987881CR

CEO

City-State-Zip: CLEARWATER FL 33761

# **2020 FOREIGN PROFIT CORPORATION REINSTATEMENT**