

(Re	equestor's Name)	·
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
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05/09/17--01018--006 **87.50

M. MILLIGAN MAY - 9 2017

COVER LETTER

TO:	Registration Se				
	Division of Co	orporations			
SURT	ECT:	TIPPING	THE SCALE	E, INC	
D C D J	DCI,	Name of Corporat	ion – must in	clude suffix	
Dear S	Sir or Madam:				
Affairs	s in Florida", "Ce	ion by Foreign Not for Profertificate of Existence", or "cenced not for profit corporate	Certificate of	Status" and che	eck are submitted to
Please	return all corresp	oondence concerning this m	atter to the fo	ollowing:	
		Nick	Spano		
		Name o	of Person		
		Tipping T	he Scale, Inc.		
	.	Firm/C	Company		
		PO Bo	x 78455		
		Ad	dress	· · · · · · · · · · · · · · · · · · ·	
		Los Angelo	es, CA 90016		
		City/State a	and Zip Code		· · · · · · · · · · · · · · · · · · ·
		nfspano	@yahoo.com		
	E-n	nail address: (to be used for	future annua	l report notifica	tion)
For fu	rther information	concerning this matter, plea	ase call:		
	Nick	Spano at (310	869-8979	
	Name o	of Person	Area Code	Daytime Tele	ephone Number
	MAILING AD Registration Se			STREET/CO Registration S	URIER ADDRESS: ection
Division of Corporations			Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			Clifton Buildin	ng e Center Circle	
	i ununussee, i L	32314		Tallahassee, F	
Enclos	ed is a check for	the following amount:			
57 \$70	0.00 Filing Fee	☐\$78.75 Filing Fee & Certificate of Status		Filing Fee & ed Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

If name unavailable in	Florida, enter alternate corporate	name adopted for the	purpose of transacting business	in Florida)
Calif	fornia	3.	27-0673069	
(State or country unde	r the law of which it is incorporate	ed) (FEI number, if applicable)	
7/30/	/2009	5	e of duration, if other than perpe	
(Date of In	corporation)	(Date	e of duration, if other than perpe	etual)
N/	/A			
ate first conducted affa	/A nirs in Florida if prior to registration	. See sections 617.150	1 & 617.1502, F.S., to determine	penalty liability.)
	11150 W. Olympic Blvd.,	ste. 750, Los Angele	s CA 90064	
	(Princi	pal office address)		
	PO Box 78455 17	os Angeles, CA 9001	6	
· · · · · · · · · · · · · · · · · · ·		ling address, if differ		<u> </u>
Providing h	nealth and wellness education and	nutrition to youth in	underserved communities	لين بس
urpose(s) of corporation	nealth and wellness education and on authorized in home state or courses of Florida registered agent:	ntry to be carried out	in the state of Florida)	17 MAY -9
urpose(s) of corporation	on authorized in home state or courses of Florida registered agent:	ntry to be carried out	in the state of Florida)	17 MAY -9 PH
urpose(s) of corporation ame and street addre Name:	on authorized in home state or cou ess of Florida registered agent: Vcor	ntry to be carried out (P.O. Box <u>NOT</u> ac p Services, LLC	in the state of Florida) ceptable)	7
urpose(s) of corporation ame and street addre Name:	on authorized in home state or coursess of Florida registered agent: Vcor 5011 Sout	ntry to be carried out (P.O. Box <u>NOT</u> ac p Services, LLC h State Road 7, Suite	in the state of Florida) ceptable)	70
Purpose(s) of corporation fame and street address Name:	on authorized in home state or coursess of Florida registered agent: Vcor 5011 Sout	ntry to be carried out (P.O. Box <u>NOT</u> ac p Services, LLC h State Road 7, Suite	in the state of Florida) ceptable)	7
Purpose(s) of corporation vame and street addressive Address: Registered agent's ving been named as in this application agree to comply	on authorized in home state or coursess of Florida registered agent: Vcor 5011 Sout Davie (City)	ntry to be carried out (P.O. Box <u>NOT</u> ac p Services, LLC h State Road 7, Suite , Florida service of process ointment as registe	in the state of Florida) ceptable) 106 33314 (Zip Code) for the above stated corporal agent and agree to act is proper and complete perform	tion at the plan

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors A. DIRECTORS Chairman: JORDAN QUAGLIETTA Address: 4512 W. WASHINGTON BLVD. #1				
A. DIRECTORS				
Chairman: JORDAN QUAGLIETTA	%			
Address: 4912 W. WASHINGTON BLUD, #7				
L.A. CA 90016				
Vice Chairman: RYAN BLACK STOCK				
Address: P.O. BOY 78455				
L.A. CA 9001C				
Director: CASEY LUM				
Address: P.O. BOX 78455, LA CA 90016				
, , , , , , , , , , , , , , , , , , ,				
Director: HEIDI +long				
Address: P.O. BOX 7845, LA CA 90016	····			
, and the second se				
B. OFFICERS				
President: NICK SPANO				
Address: 1918 WEST BLUD.				
L.A. CA 96016				
Vice President: TARUN RAJ				
Address: 1038 S. MARIPOSA, #304				
L.A. CA 90006				

NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	MICK SPANO
	(Typed or printed name and capacity of person signing application)

PEARSON

JAMES PEARSON

W. WASHINGTON BLUD, #1, L.A. CA 90016

JAMES

4512

Secretary:

Address:

Treasurer:

Address:

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

TIPPING THE SCALE

FILE NUMBER:

FORMATION DATE:

TYPE:

JURISDICTION:

STATUS:

C3221489

07/30/2009

DOMESTIC NONPROFIT CORPORATION

CALIFORNIA

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 27, 2017.

ALEX PADILLA Secretary of State