## F2100004615

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SO THE STATE OF STATE

AUG 12 2021 M. SOLOMON

## **COVER LETTER**

TO: Registration Section Division of Corporati	ons			
SUBJECT: Balance US Inc.				
	Name of corporation	on - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by "Certificate of Existence." or above referenced foreign corp	"Certificate of Good Sta	inding" and check are sub		
Please return all corresponden	ce concerning this matte	er to the following:		
Martina Velez				
· · · · · · · · · · · · · · · · · · ·	Name o	f Person		
Balance US Inc.				
<del>-</del> -	Firm/Co	mpany		
1030 S Federal HWY				
	Add	ress		
Hollywood , Florida , 33020				
	City/State	and Zip code		
mail@due-dil.me				
E-r	nail address: (to be used	for future annual report n	otification)	
For further information conce	rning this matter, please	call:		
Martina Velez	954 at (	518-3434	) 518-3434  Daytime Telephone Number	
Name of Person	Area Co	de Daytime Telepl	none Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration S Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
_	LORIDA DEPARTMEN	T OF STATE  ☐ \$78.75 Filing Fee &  Certified Copy	▼ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	able in Florida, enter alternate corporate name			<u> </u>
Delaware	3.	3. 86-2736795 (FEI number, if applicable)		
	ry under the law of which it is incorporated)	(FEI number, it appli	cable)	
4. March 12,2021	5.		,	_
	(Date of incorporation) 5. (Date of duration, if other than perpetu			
		n Florida, if prior to registration) 502, F.S., to determine penalty liability	<u> </u>	-
7	IWY , Hollywood , Florida , 33020	ice street address)		_
	(Frincipal off	ice <u>street</u> address)		
	(Current mailir	ng address, if different)	<del></del>	2021
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)  Martina Velez				121 AUG 12 P
Office Address:	1030 S Federal HWY		7 5 TATE	P# 4: 05
one radical	Hollywood	Florida 33020	min Min	0.5
	(City)	(Zip code)		
Taving been nan lesignated in this urther agree to c	ent's acceptance: ned as registered agent and to accept serving application, I hereby accept the appointmentally with the provisions of all statutes rewith and accept the obligations of my po	nent as registered agent and agree clative to the proper and complete	to act in this capa	acity. I

10. 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS	Later Commence St.					
□Chairman	Name:	⊒Chairman	Name:	-		
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	Odintsov district.	□Director				
■President	Uspenskoye 21 ,Russia	□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer		
□Other	Other	□Other	<del></del>	□ Other		
□Chairman □Vice Chairman	Name:1701 NE 115th st apt 28A	□Chairman				
□Director	Miami, Fl. 33181	□Director				
□President		□President				
■ Vice President		□Vice President				
☐ Secretary	□Treasurer	□Secretary		□Treasurer : S		
□Other	Other	□Other		□Other		
□Chairman	Name:	□Chairman	Name:	12 PM 4:		
□Vice Chairman	Address: Moscow Region	□Vice Chairman	Address:	등 <b>6</b> -		
□ Director	Odintsov district,	□Director				
□President	Uspenskoye 21 ,Russia	□President				
□Vice President		□Vice President				
<b>■</b> Secretary	□Treasurer	□Secretary		☐Treasurer		
□Other		□Other		□Othei		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  12						

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BALANCE US INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWELFTH DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BALANCE US INC."

WAS INCORPORATED ON THE FIFTEENTH DAY OF FEBRUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203907955

Date: 08-12-21





July 12, 2021

MARTINA VELEZ BALANCE US INC. 1030 S FEDERAL HWY HOLLYWOOD, FL 33020

SUBJECT: BALANCE US INC. Ref. Number: W21000099271

We have received your document for BALANCE US INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

200 22

Letter Number: 421A00015907