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08 MAR 12 PM 3:00

W08-7510
FEB 12 2008

J. BRYAN

MAR 12 2008

EXAMINER

To whom it may concern,

This is the paperwork to show the existence of LifeBalance, LLC which has been recently changed to Body Balance Institute, LLC , and the paperwork to register this LLC as a foreign corporation in Florida.

If you need further information , please feel free to contact me,

Sincerely,



Vicki K. Sullivan

President *Manager*
Body Balance Institute LLC
2744 Woody Place
Jacksonville FL 32216
904-210-1472

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DIVISION OF CORPORATIONS
08 MAR 12 PM 3:00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Body Balance Institute
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Vicki K. Sullivan
(Name of Person)

Body Balance Institute
(Firm/Company)

2744 Woody Place
(Address)

Jacksonville, FL, 32216
(City/State and Zip Code)

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For further information concerning this matter, please call:

Ann K Sullivan at (757) 623-3000
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 12, 2008

VICKI K. SULLIVAN
BODY BALANCE INSTITUTE
2744 WOODY PLACE
JACKSONVILLE, FL 32216

SUBJECT: BODY BALANCE INSTITUTE, LLC
Ref. Number: W08000007510

FILED STATE
SECRETARY OF CORPORATIONS
08 MAR 12 PM 3:00

We have received your document for BODY BALANCE INSTITUTE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

You can only list one person to be registered agent and that person signs,

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 908A00009125

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Body Balance Institute, LLC, 2001-01-01
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Commonwealth of Virginia 3. 20-8391753
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Organized as LifeBalance, LLC on July 10, 2003 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. Body Balance Institute will begin upon registration
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 1200 Bank of America Center
One Commerce Place, Norfolk, VA 23510
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

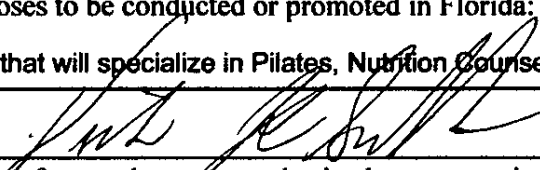
Vicki K. Sullivan

2744 Woody Place

Jacksonville, FL, 32216

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: The business will be a
Fitness and wellness facility that will specialize in Pilates, Nutrition Counseling, and Physical Therapy.


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Vicki K. Sullivan

Typed or printed name of signee

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DIVISION OF CORPORATIONS
08 MAR 12 PM 3:08

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Body Balance Institute, LLC

If name unavailable, the alternate name to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Vicki K. SULLIVAN
(Name)

2744 Woody Place

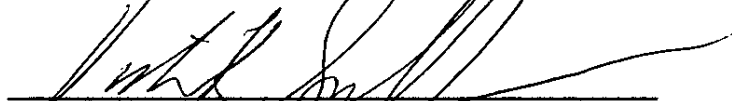
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Jacksonville, FL, 32216

City/State/Zip

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Commonwealth of Virginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

A certificate of organization was issued by the Commission to Body Balance Institute, LLC, a limited liability company formed under the laws of VIRGINIA, effective as of July 10, 2003.

As of the date below, articles of cancellation have not been filed in this office by Body Balance Institute, LLC, a Virginia limited liability company.

Nothing more is hereby certified.

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*Signed and Sealed at Richmond on this Date:
March 7, 2008*



Joel H. Peck
Joel H. Peck, Clerk of the Commission