

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P13000100659

FILED
Oct 14, 2014
Secretary of State

Entity Name: IDEAL PAIN SOLUTIONS INC.

Current Principal Place of Business:

2855 SOUTH ATLANTIC
DAYTONA BEACH, FL 32118

New Principal Place of Business:

2855 SOUTH ATLANTIC
UNIT 404
DAYTONA BEACH, FL 32118

Current Mailing Address:

2855 SOUTH ATLANTIC
DAYTONA BEACH, FL 32118

New Mailing Address:

2855 SOUTH ATLANTIC
UNIT 404
DAYTONA BEACH, FL 32118

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST 4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: NATALIA UTRERA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPS
Name: BROWN, TERESA
Address: 2855 SOUTH ATLANTIC UNIT 404
City-St-Zip: DAYTONA BEACH, FL 32118

Title: P
Name: BROWN, NEIL
Address: 2855 SOUTH ATLANTIC UNIT 404
City-St-Zip: DAYTONA BEACH, FL 32118

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: NEIL BROWN

DR.

10/14/2014

Electronic Signature of Signing Officer or Director

Date