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.

PRESIDENT

SIGNATURE: PETER J STAWICKI

Electronic Signature of Signing Officer/Director Detail

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FEI Number: 46-1105303

Name and Address of Current Registered Agent:

6431 NW 42ND CT CORAL SPRINGS, FL 33067 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.

SIGNATURE: PETER J STAWICKI

Electronic Signature of Registered Agent

Officer/Director Detail :

PST Title STAWICKI, PETER J Name 6431 NW 42ND CT Address City-State-Zip: CORAL SPRINGS FL 33067

2020 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P12000083322

Entity Name: MUSCLE ACTIVATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

5458 TOWN CENTER ROAD, SUITE 15 BOCA RATON, FL 33486

Current Mailing Address:

5458 TOWN CENTER RD BOCA RATON, FL 33486 US

STAWICKI, PETER J

FILED Jan 13, 2020

Certificate of Status Desired: Yes

01/13/2020

Date

01/13/2020