| | icipal Place of Business: | | | |
|---|--|--------------------------|--|--------------------------------|
| 384 S MILITAR | | | | |
| DEERFIELD BE | ACH, FL 33442 | | | |
| Current Mai | ling Address: | | | |
| 384 S MILITA DEERFIELD | ARY TRAIL BEACH, FL 33442 US | | | |
| FEI Number: 02-0629321 Certificate of Status | | | Certificate of Status Desi | red: No |
| Name and A | ddress of Current Registered Agent: | | | |
| | | | | |
| SCHEUR, JILL 1019 S RIVERS POMPANO BEA | NDE DR ACH, FL 33062 US | | | |
| 1019 S RÍVERS POMPANO BEA | | stered office or regis | tered agent, or both, in the State of Flor | rida. |
| 1019 S RIVERS POMPANO BEA | ACH, FL 33062 US | stered office or regis | tered agent, or both, in the State of Flor | ^{iida.} 10/08/2019 |
| 1019 S RIVERS POMPANO BEA | ACH, FL 33062 US I entity submits this statement for the purpose of changing its regis | stered office or regis | tered agent, or both, in the State of Flor | |
| 1019 S RIVERS POMPANO BEA | ACH, FL 33062 US I entity submits this statement for the purpose of changing its regis :: JILL SCHEUR Electronic Signature of Registered Agent | stered office or regis | tered agent, or both, in the State of Flor | 10/08/2019 |
| 1019 S RİVERS POMPANO BE/ The above named SIGNATURE | ACH, FL 33062 US I entity submits this statement for the purpose of changing its regis :: JILL SCHEUR Electronic Signature of Registered Agent | stered office or regis | tered agent, or both, in the State of Floi | 10/08/2019 |
| 1019 S RİVERS POMPANO BEA The above named SIGNATURE Officer/Direc | ACH, FL 33062 US I entity submits this statement for the purpose of changing its regis : JILL SCHEUR Electronic Signature of Registered Agent ctor Detail : | | | 10/08/2019 |
| 1019 S RİVERS POMPANO BE/ The above named SIGNATURE Officer/Dired Title | ACH, FL 33062 US I entity submits this statement for the purpose of changing its regis : JILL SCHEUR Electronic Signature of Registered Agent Ctor Detail : P | Title | VP | 10/08/2019 |
| 1019 S RİVERS POMPANO BEA The above named SIGNATURE Officer/Dired Title Name | ACH, FL 33062 US d entity submits this statement for the purpose of changing its regis E JILL SCHEUR Electronic Signature of Registered Agent Ctor Detail : P SCHEUR, JILL 384 S MILITARY TRAIL | Title Name | VP SCHEUR, JAY 384 S MILITARY TRAIL | 10/08/2019 |
| 1019 S RİVERS POMPANO BE/ The above named SIGNATURE Officer/Dired Title Name Address | ACH, FL 33062 US d entity submits this statement for the purpose of changing its regis E JILL SCHEUR Electronic Signature of Registered Agent Ctor Detail : P SCHEUR, JILL 384 S MILITARY TRAIL | Title Name Address | VP SCHEUR, JAY 384 S MILITARY TRAIL | 10/08/2019 |

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: JILL SCHEUR

PRESIDENT

10/08/2019

Electronic Signature of Signing Officer/Director Detail

2019 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F0700003167

Entity Name: DR. JILL'S FOOT PADS INC.

Current Principal Place of Business:

FILED Oct 08, 2019 Secretary of State 0140681419CR

Date