

## REINSTATEMENT

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1. Entity ID Number:	2. The name of the en	tity is:					
1667359	Take Back Your Life						
3. Date of Revocation:	4. Reason for Revocation.						
01-15-2020	Annual Report						
5. Entity Type:				- <u> </u>			
Non-Profit							
6. The reinstatement includes.				<del> </del>			
Annual Reports (# of reports	s) l	(report filing fee)	\$ 20	Total Fees \$ 20			
Penalty fees (# of years)	1	(penalty fee)	\$ 25	Total Fees \$ 25			
Replacement filing fee	\$						
LOGS (Tax Good Standing)							
Legislative Act/Court Order							
Change of Agent Form (filin	g fee) \$						
Change of Registered Office	e Form - NO FEE						
Certificate of Correction							
Amendment (name change	required)						
7. The reinstatement is accompa	anied by:						

JAN 31 2020 FILIP
BY WE 9/6-3
3/04