Introduction and Guest Background

Welcome back to the Bioregulator and Peptide Summit everybody. We have a phenomenal guest here. I mean one in a string of phenomenal guests. But I am so excited to be back with this guy.

This my next guest is someone who has been living and breathing peptides for well over two decades, long before the rest of the world started paying attention.

Jean-Francois Tremblay holds advanced training in exercise physiology, biochemistry, pharmacy and pharmacology, and he is both a pharmacologist and the founder of Ken Lab Research and Ken Lab.

Pay attention to those names, guys. We're going to talk about them a little later. This is a high quality peptide synthesis company based internationally now for more than 20 years.

Jean Francois has been at the intersection of rigorous science and real world application. Studying how peptides work, how they're made, and how we can use them intelligently for healthy aging, sports performance, tissue repair, and personalized health.

He is one of the most trusted voices in the peptide space, and my mentor not just because he knows the research, but because he actually produces these compounds.

That gives him a perspective that very few people in his field can offer. He understands quality, purity, and synthesis standards from the inside out.

Now, whether we're talking about bio regulators, healing peptides, performance compounds, or what the future of this field looks like. Jean-Francois brings both the science and the street level expertise.

I am so excited to have him here today. Please join me in welcoming Jean-Francois Trombley. Jean-Francois. It's nice to be back. It's great to have you back.

You are literally before I even had a podcast. You are the very first interview video that I ever posted on YouTube. And if anybody see one size, know even before that we did.

It was even longer. That and the heart. I'll tell you guys, the hardest parts about interviewing Jean-Francois are the following. Number one, staying within the time limit.

That's the that's the hardest one. The second hardest one is figuring out what the heck to talk about. Because we can talk about so many things. Thymus and beta four and TB 500.

And for those of you who think that those two are the same, we're about to still we're still think that this is the same. We're going to make some corrections here.

So let's start with. First of all, why do people try to use thymus and beta four and TB 500. Interchangeably. What's what's the root of this. What's okay.

The root is and I wrote a little article in that. Well actually in your thing you had on Facebook that my Facebook group that is now defunct. Yes. Basically initially, like years and years ago, TB 500 was a commercial name.

So and they were selling timers and built for under the name TB 500. And that was a veterinarian product using horses, which brings what I always say, you know, if it's good for $1 million worth, it's good for me.

But anyway. So and at some point in time, the company shifted from time isn't better for to the fragment of the 1723 fragment. But they came the same.

They kept the same name. And when it hit first, obviously, you know, cross product body builders, they called it time as in TB 500. And since then there is that confusion.

TB-500 vs Thymosin Beta-4

So basically to use TB 500 doesn't it describes both technically because at one point in time it was bought. So that's but the big difference is this time is in beta for is a full molecule of 43 amino acid.

What is the other one? So to say. The fragment is that a section of that long chain. And I like to explain it in this way. Time is data for as multifunction and it's like a keychain with many keys.

So when you use the full molecule, you have access to all the keys, so you get the effect on the heart effect and inflammatory healing effect on your genesis.

Mainly that's what you got. So but let's say you want mainly the ancient memory effect which is great. Then you use the 1 to 4 fragments of the amino acid 1 to 4.

If you want, specifically the healing effect, then you use a fragment 17 to 23. And that's healing of soft tissue right. That's tendons ligaments muscle genesis.

And so the difference. And people will ask why would you use one over the other. It's a question of bang for your buck. Technically if you're looking at healing the fragment being much smaller.

So milligram or milligrams, you get like 6 to 8 more molecules for milligrams. So more more attachments when you're using that, when you're using the fragment.

Right. The fragment. But you don't get the other effects. So you know it's a train. When do you want if you're looking. I truly TB time isn't better for to me is one anti-aging effect big time when you use the full molecule.

Because in one study, the researcher described it as for the heart giving back to the heart its native state. So bringing it back to like it should function optimally when it was young.

And then you start like thinking out loud in the study, he said, well, he said, probably does it, does it for other organs and we know it does. So I like to see it too, as a very potent anti-aging.

So you use the full molecule. Now the way you see it today in those mixes, you know, glow and then the fragment has a better. Yeah. So so let's back up a little bit because there's two other fragments we you talk about quite often.

So you just talked about the 1 to 4 which is the main anti-inflammatory where its main, its main effect is going to be to reduce inflammation. You talk about the 17 to 23 which is actually TB 500 if we're going to be technical about it, right, as the one that's for musculoskeletal healing, there's two other ones.

So there's one that has specific effect on the heart, right is a different fragment. And then what's the fourth one is that the immune one is no no no no no it's the 1 to 15.

And it's a bit shady when it does. Shady okay. Well okay we made it. But I never found a real application to it. So to say. So it does something but just not sure what.

I never worked with it. I cannot speak of it. And what's the fourth one? Then there's another one 4040 to 43. That's the heart specific. That's the heart one. Okay.

Perfect. Okay. So now having said that, right now it's hard to find the fragments there's people using. There are

supplement companies that are providing the frags as oral in oral capsules because they're very small.

Do you think that their surviving digestion or the 1 to 4 it's the size of bio later. Yeah. So and we know that the way by letters are absorbed through you know, it's the map brain that kind of and blow them and pull them in.

So chances are the 1 to 4 bio regulator then simply is absorbed to a degree this way. What about the 40 to 43. It's only 40. It's. Sorry again for the small size. Yeah.

You know that the sign walls would recognize it. Okay. It's small enough. We'll take it in. If you have and testing of permeability then you're going to take everything in.

That's the problem. But no problem. That's not the problem. Yeah, yeah. But do you understand. So being that small, you could think. And there are people who use this 1 to 4.

Yeah. As an intern orally. And they got results not as strong as if it was injected but they got results. So yeah it does penetrate. Okay. Next question, which is the fragment that destabilizes mast cells.

Because there is one of those fragments that specifically and it doesn't the full molecule. And for sure 17 to 23. Yeah okay. So and so for and that's important to mention because for people who are who have histamine, any kind of histamine issues or MCA's me over here, I didn't I didn't know I had those issues until I used it before.

Yeah. And it's going to make you tip like it's going to tip you over reaction. Yeah. Yeah. So you will. So for people who have who know you've got histamine issues that full TB for molecule as well as unfortunately the 17 to 23.

So the TB 500 could very easily cause a problem for you. So let's talk about. So number one just to recap, you know you're getting the full TB four molecule if it's 43 amino acids long.

So you've got to if wherever you're sourcing this from you've got to be able to find out how many how long is the chain that you're buying. If you're buying actual TB 500 it's what is it for five amino acids.

What do we say 17 to 23, 17, 18, 19, 20, 21, 16, 27 amino acids long? Yes. I'm counting on my fingers. Sorry. And then. And so now you guys have the breakdown roughly of those active fragments.

Let's talk a little bit about what about thymus and beta four. It comes from the thymus gland. What about any kind of immune modulation or any impact on the immune system.

The time is now for one. And time isn't better for come from the same protein that's called thymus as a protein. The same thing VPC comes from a protein. Yes.

And 157. It's a fragment of that protein. So it comes from. So time hasn't been for us. Some immune system activity and time is enough for one as healing property tools.

Actually for nerve it's really good.

Thymosin Fragments and Oral Absorption

You know if you have Parkinson's, you know any neurodegenerative disease. Yeah. Time is an alpha one is pretty good in some aspects. So yeah. But because the alpha one is strong on the immune system, time isn't better for is strong on the healing angiogenesis and yeah anti-inflammatory.

So that's I mean that's pretty fascinating. So thymus and alpha. So now that we're into the thymus peptides we're starting to spread out. We're starting to spread out.

This is what happens when we start talking to Jean-Francois. Just so you guys are clear, I am going to branch a little bit into Thymus and Alpha one. You mentioned nerves.

Now thymus and beta four also. Yes. I've learned from you. Right. If we're trying to heal nerves, thymus and beta four does show some benefit in nerve healing.

And we and I know that when we've talked in the past, BPC 157, which doesn't always get talked about in nerve healing, also has nerve healing properties.

And we just changed the ratio of those two, right? 1 to 1 BPC, 157 to thymus and beta four. If we're healing musculoskeletal 2 to 1, I believe is what you said.

The ratios the whether sold under right now. Yeah yeah yeah yeah yeah. Well actually so you're you look at the studies. Yeah. And you convert to humans and better for is always used in many grams.

And if you convert it can be like 2030 40mg a day. If people would follow the conversion BPC when you convert to human it's micrograms. So somehow it's a lot more potent per milligram than what it does.

So the ratios can be anything from depending on the context can be 15 to 1. Yeah. Yeah yeah. But you're using more TB for yes down to 3 to 1. A 1 to 1 ratio is you're going to have either not enough of 1 or 2.

You know it's not it's not going to do. You're going to get an effect of course. But depending on how maturity there is one of the two you won't have enough.

So let's get into that because there's some very popular formulas out there. But so before we get into this, what I want to one myth I want to blow up right now is the if you put three peptides in a vial and add bacterial static water, they're going to make babies and you're going to have a whole bunch of mutant peptides. So can we qualify?

Can we explain to you? That's me I like to explain that, you know, not biochemically or common sense. Let's say you inject those three peptides separately.

Well, they're going to join in the bloodstream with thousands of other peptides at what we know in chemistry, higher temperature, which is 37°C. So that's February's chemical reactions.

And they don't interact. So that's it. That's the point. And that brings the point to in terms of stability and temperature I've turned seven degrees.

We know they don't degrade the reason they grade in the in the blood. It's not because of the temperature. It's because we have peptides that breaks them down.

Yeah. And there are actually drugs that inhibitors of peptides. And when they are used the peptides they stay there for like the longest time. So we know for sure that up to 37 degrees peptides on the and they won't interact and mix. And.

We did a study with a few of them I remember seeing and there were no no no interaction at all. At all. It's got built you know, that they cannot interact in the middle.

You know, when the tide is made, they take one amino acid and they block one side, so nothing binds to it. And then the, the second peptide then and then they like the end and then they make it an acetate.

So the acetate block that end and the other side is blocked so that they cannot react. It's like. It's like but at that time it won't be a peptide. It would be a polypeptide or a small protein right then.

But and what we worked with, there's really something we don't need to worry about. Okay. So that's what aside those new ones, the GLP ones because they have a long side chain.

And that's one that would be careful. I wouldn't mix those with anything else in the same via the same vial. Yeah. Or in the same story. Just to be on the safe side.

Yeah, yeah. Just keep which is interesting because which is interesting because there are a lot of compounding pharmacies that will add. Now it's not a peptide necessarily, but they would add B12 to the GLP mix.

I can't comment on that okay. I don't know. Yeah. But let's say I wouldn't do it with energy plus plus telling you it's charge. So that could have an effect and effect.

I haven't seen it, I haven't looked into it. But same side. Don't mix the GLP with anything else. That's okay. So now yeah. So now let's talk about the glow, the clothes, all these even even to some degree the Wolverine.

So these are formulas where people are taking BPC 1575 and beta four or TB 500 depending. They're taking GHQ copper. They're putting them together. They're combining them in a formula in the vial.

So now we've already said stability is not the problem. So that's not the issue where the issues come up here is in dosing.

BPC-157, Ratios, and Peptide Mixing

And it is I don't even know if it's possible to get a ratio that is appropriate because you have BPC 157 that technically works better if we split the dose into over the course of the day, number one, TB 500 or thymus in beta for the way I've used it in the past.

Until I became my body decided it was a no go is I would use it at a higher dose every two days, let's say 2 to 3 days. I would split that dose and allow it to kind of, you know, do its thing over a couple of days.

And then with the GHQ, when we talked about GHQ on podcasts in the past, you and me, you talk about in the animal studies where when they got the really great results that they got, they were infusing that peptide into the animals over the course of ten, or I think it was ten hours, it was multiple.

It was one small injection every hour for ten hours and. Right. Yeah. But that's when they showed this incredible healing properties. So now you have people who are.

And then that led you to do the insulin, the infamous insulin pump application where you took an insulin pump, you loaded it up with GCHQ copper and you had it infusing over ten hours a day and said there it is going to have to get my the one anyway over ten hours a day.

And that's when you saw the real results. And also we did have some crazy people in the Facebook group. With respect, I say this, who were administering it ten times a day to themselves in small doses.

So let's pull back. Let's go back to these formulas and talk about why you're probably you're sacrificing for convenience. Yeah. Well, by having a fixed mix again, the Wolverine, which is if it's the fragment of time, isn't that for the 17 to 23 with BPC, then the rush, the ratio if it's 1 to 1 is okay, kind of okay.

Because as I told you, you get six times the healing effect of the full molecule. So now when you put them you have a nice ratio there. Okay. That's the only occasion I if you had a turd and the fourth one, then you talked to one dose and you cannot use it for everything you use it.

It's like a basic. And that's the thing with peptides. You cannot say that's good for everybody and for every condition, you know, as friend is. But they're not drugs, they're peptides.

So it's not the same. As I say, if you use it to repair a tendon, for example. And I always use this example, if you're have a torn tendon, for example, you don't do nothing about it.

It's going to heal by itself. So you just throw in a bit of peptide before BPC and it's going to accelerate the healing a lot. But if you have a degenerative condition and you don't do anything about it, then it's going to get worse.

So now that calls for much higher dosages, because first you have to slow down and stop and then reverse. And now you go uphill. So you need like excuse my friend, shift load of peptides to to to achieve that.

And that's when the fragments too are good because you can decrease those dosages if you are to use. And again there are people still jump on the dosage.

But if you use 100mg of TB four times ended for a day. Well, if you use a fragment, you bring down that need to maybe 10 or 12mg, which is already mega dosing compared to what people use.

So I just want to say but it's not saying well, but it is. But we're not saying. So. Number one, let's back up a little bit because people are going to listen to this and they're number one.

They're going to you're blowing their minds because 100mg is like $1,000. So. Right. So a b it is multiples higher than anybody's ever talked about. So I just want to you know we're going to talk about safety NGO Genesis and all of that.

So I think what you're talking about here is when you're working with a practitioner who really knows this stuff, and you have a very, you know, you have a serious condition.

I know that you know, your friend Tim, back in the day, at the time, he was working with people with ALS, with Parkinson's, with, you know, crazy conditions and those those recipes, if you will, that he was using would blow people's minds today if they were listening.

So that's why we know today it works. Right. So but it's yeah. To that point there is that one study that was done on humans where they gave them up to 1.26g.

So that's 1260mg of time is in beta for per day for 14 days. They wanted to see if there is any side effects and all that on humans. They did this on humans. Yeah.

Of course I'll send you the over there and it will throw it in. We'll throw the link in the show notes. So and the only side effects the detector that that high very high dosage is that I think three subject and mouth disease.

And my sense is it wasn't due to the time itself, but probably the amazing repair on the liver. Maybe some stuff was released. And you know, when you're doing like a reaction.

Yeah. Yeah, yeah. So otherwise they stop first they say because nobody will ever take that much and it's 100% safe at that much. So okay. So going back to the formulas, I think that anything first of all that includes GCC copper.

You're selling yourself short. You may either that or you need to then administer GCC copper on its own through the day, or at least a couple more times a day.

Kind of. What do you think change a bit? It seems that if you use it for what most people use it skin and hair, it works as it is at 2.5 per day and all that, but just one, one, one.

Not because of the GCC, because of the copper. Naturally you understand. So but if you want the full fledged, you know, the 4000 genes gene turned on or off, depending that, like ridiculously amazing anti-aging effect repairing and everything, then you need to go through one of those protocols.

Yeah, the multiple either the infusion over time or the multiple otherwise. And that's again, that's from the study. That's from the father of GCC, Kevin Son was cited was cited once.

He said, I wish I had discovered that one like he was in love with GCC, but it doesn't work the same as the by regulators because it's still it's still works from outside the cell by it activates the genes, but from outside the cell by a regular count.

That's why you have to take it multiple times. Because we know by your regulator do they attach to the DNA chain and they stay there for long. That's why you do it twice a year and you're good.

You know, your cells that die, you need to replenish. But yeah. So it works differently. But it's an amazing but tired. But you you you need to know because don't fool yourself.

You take care of your hair improve your skin improve. But you're not getting that improvement, that deep, deep, deep improvement that a lot of people are seeking.

So let's talk about the a word that freaks people right out, right? Which is angiogenesis. Whenever we say angiogenesis, people flip. And you know, there's there's concerns right.

Because and let me finish. And then then it's your turn thymus. And we have to talk to each other this way you guys because we're good friends. So just anybody who's sitting there going you just disrespected him.

GHK-Cu Dosing and Angiogenesis

No, no, I mean, this is this is our routine. So angiogenesis is triggered. You talked about it for thymus and beta for it's also known to be an effect of BPC 157.

Angiogenesis is the formation of new blood vessels to bring blood flow to an area of injury. And this is why these two compounds have shown so much benefit in the healing of tendons and ligaments, which are notoriously poor in blood supply.

But we talk angiogenesis and people throw their hands up, which I'm not going to do because it'll mess up my camera and they say, oh my God, angiogenesis, cancer, tumors.

This is going to drive cancer. So can we, can we please I know that you have some very strong thoughts on this. Can you please talk about it? Okay. I'm going to talk about it from a common sense point of view but also biochemical after.

Yes, but okay, I come you know, my first degree was in kinesiology. I worked back in the 80s and I worked with Buddy Builders and all that, and they were the first to use No Tropic and all that.

They brought a lot of things that they weren't the first bikers before they were 100%. Yeah, yeah. No, I was very pinpointed in their goals, but and they would try anything.

They didn't care. So that's nothing, you know. So in the sport for example Motsi I've learned of human dosage not from research I've learned because at tour de France the cyclist never surprised.

I just discover it. Then I find out they're using it already in the tour de France. And I got to know how much you were using. And I say, okay, that's it works.

And that dosage for sport and all that. So those people, they try everything. And why I bring that point in sports, that's because if you increase your vascularization through angiogenesis by doing nothing, you increase your will to max by a few points.

Right. So they tried they tried BPC. Let's use it to increase them to max by Andrew Genesis. Well anybody anybody knows Earth either naturally using it for that purpose.

No, because they know it doesn't work right. It works when and where it's needed. So basically and that's the beauty of peptides. Drug that I said drugs forces it's action.

Sometimes I do if you take me out of time. Well I'm sorry you will done so. But you know those BPC time is in alpha one better for you know, the classic main ones.

They don't force their action. If there is no repair method, you won't over repair. You won't end up with thicker cartilage for example right. Or ligament because you're using it now.

There's no need. It's not going to do nothing there. So it's the same with angiogenesis, is that most of the study that were done, it was done in vitro.

So you have a little piece of meat and little dish. We are starving of everything including oxygen okay. Yes they infuse it but deep and all that. So you through the peptides and you like the tissue develop more vascularization in response because hey they can get more oxygen that it's not thinking but you know, tells the intelligence of the cells so they go for it.

But empirically there is either two things happening at that. I've seen in cancer therapies where time isn't better for and BPC were used and with them not in small dosages and improvement were seen.

So either it didn't affect in the way people are afraid of, or maybe there was some angiogenesis that you wouldn't want, but it was all out weathered by the other benefits in that therapy.

So at that it was still a positive effect, not a negative effect. And that's that's how I see it. So okay. So I'm going to jump in here and say if somebody is listening to this and you have active cancer, don't go buying thymus in beta four and BPC 157 and start using it.

No no no. Find a practitioner. Need to really find a medical doctor here. Yeah. Ongoing testing of everything. Of course. Of course. Yeah. So no, but you know, we we need to say it because.

Because it's important. Right? We're talking to a lot of people here that are very knowledgeable. They're looking for answers for themselves. So the caveat remains that if you have an active condition and especially when you if you have an active any kind of condition, you need to get guidance on this stuff from someone who really knows what they're doing and who's worked with these compounds in the past and are working with them now.

So I just want to put that out there. So sorry. Another example ibuprofen. It's great. It's a great okay for somebody who doesn't know peptides a usable profit for inflammation.

Yeah it's really bad for the kidneys and liver. But yeah I've I've no a friend from ibuprofen. He was a bloody builder. Abused not his own like dialysis.

Yeah. But that's an extreme case. But the benefits, the pain relief and transfer matter, in fact, outweighed the risk on the, on the kidneys, in and in the short term if it's not over you.

Exactly. So, you know, that's what I meant by. Yes, you have that bad effect, but the benefits outweigh the general effect. And nobody well, nobody withdrew ibuprofen or stop thinking it.

Well, and it's again, it's appropriate use at the right dose and the right time for the right period of time. And it's part of the reason why maybe you don't want to be using BPC 157 and thymus and beta for 365 days a year.

I mean, maybe you want to come off it. Everyone's I mean, to me, you use it when you need it and then you're off it. You don't just you don't just blindly use this stuff.

Okay? One other thing is here's another big one. People will say there's a big fight often about, do you need to apply it to the site of an injury or can you use it systemically?

And again, this is a new on stance. There's two answers to this. I'm going to invite you to impact that for people. If if you want to do it at the site of the injury, then you have to go in the site and infiltration literally not near the site.

So if you go subcutaneous on the elbow, well, you're not independent. You are next to it and that's fine. Yes, but the peptide will be snatched by the blood circulation before, you know, before it diffuse to the tendon.

It won't refuse to the tender, but the relation will bring it back through the micro circulation in the tendon to bring it there. So unless you're like, up to it, then pull the tendon.

I wouldn't do that. That's amazingly painful, you know. No. It's systemic. They have in the body. They were systemically they don't, you know, locally like like that.

We have seen improvement and effects when it's done lake locally through infiltrations. Yes. But that has to be like no choice done by a doctor with true altruism guiding and all that.

Safety Caveats and Site-Specific Use

So yeah, just do systemic and it's going to work perfectly and you're going to be fine. Yeah. And that's the thing. I mean, you even have medical doctors now that are like guys like Matt Cook, for example, who will hydro dissect a nerve with some of these peptides.

And this is like a highly specialized procedure. It's done under imaging. And these guys are getting into the nerve sheath and introducing the peptide to initiate healing.

So things like, you know there's there's a big difference between and again like plenty of people have seen benefits for injuries using these things systemically.

Frankly I've even seen people using things orally and getting musculoskeletal benefits. It's it still happens. It's not as good, but it definitely can be beneficial.

Okay. Well, I think that that's most of our topics for today. The next thing we're going to talk about is you've been out of the market for a while now because of all kinds of reasons, good and bad, of because of a series of events.

And there's now a bit of a battle for the brand name Ken Lab, because it was such a trusted brand for so long. So there are other players that are trying to kind of piggyback on your history.

So what I'd like to leave the audience with, just like you need to know the difference between TB 500 and TB four. You also need to understand which can lab is associated with Jean-Francois and which can lab is not so Jean-Francois letter.

And then we have an announcement time. And for the last few years none are associated with me. None. They all freelancers. They arrived on my name and reputation and camps name to promote their thing.

I have nothing to do with them. I cannot respond for their the quality of their service or products or anything they have. I have nothing to do with them, basically.

I'm glad though, that they're kind of copycats because, you know, imitation is the highest form of flattery. You know that 100%. And it turns out that lab is the only one that has been duplicated like that.

So it needs to be. Thank you guys. Appreciate. But you know, further people, as my personal Instagram that's linked to Facebook and have professional Instagram now I'm posting those things on the professional one were soon to open in the few South American countries in Europe.

In a few places I'm not going to name them all, but big, big things are coming in the US right now. You have. We didn't have and we don't have. I don't have any presence. They have.

So any can have anything you're buying in the States right now has nothing to do with Jean-Francois. But moving forward, I think the what you said was the only €2 you'll be using will be Ken Lab and maybe Ken Labs.

That's that not that can have that would be period one not. And without an s can only one lab. The idea is to have that main page and you are going to have buttons.

So if you're in Mexico you press Canada Mexico. That's going to bring you to the store in Mexico or Europe. That's going to bring you to the store. But that's going to be the parting, the starting page where it will be.

The landing page will be lab com. Okay. And then and then the next announcement, which is only half an announcement.

Ken Lab Updates and Closing Remarks

But that is that, you know, in my membership community, people are already saying, well wait, are we going to be able to get them, get them in the States?

Can we get the products in Canada? And the truth of the matter is, can lab cannot operate in Canada or the US. However, however. Well, I've been working and I don't know what I'm going to do by Monday to open the lab.

There cannot. We're going to make that. No no, no. And, you know, I bring my Bible chemist. We're opening there. And the reason we're opening there is that again, I'll know more next week, but we're going to have government government approval.

But yeah, but you know, maybe. Yeah, but from there, with that kind of thing, true medicine will be able to provide to anybody, anybody, anywhere on the planet legally and without problems.

So folks, for more information about this, how it's unfolded and how it happens, because this is going to air in August. So by August all of this will be settled.

So what I would encourage you all to do is to follow Jean-Francois. Jean-Francois, what are your handles on Instagram or Facebook? Wherever you're keeping in touch with people.

How do people find you? Well, Instagram, not my hand. It's just, you know what? We'll put it in the show notes. It's fine. Perfect. We'll put it all in the show notes and then can keep checking back on Ken.

com, because that also is where you'll be able to take to its latest soon. We're going to use it very soon as an information site where I'm going to put the old like education and new information until the stores start to open.

Then it's going to become the website where to get them. Perfect. Amazing. JF a pleasure as always. Thank you for your time. We'll be doing series together.

There'll be more on the podcast in the coming weeks and months. But thank you for participating in the summit. We appreciate you and we're so happy to have you back.

Thank you. Thank you.