

1/7/20 Jan. 7, 2022 5:02PM

Division of Corporations

No. 1503

L22000010589

Florida Department of State
Division of Corporations
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To:

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From:

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Account Number : I20110000021
Phone : (727)822-4355
Fax Number : (727)209-3467

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: dalonzo250@gmail.com

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**FLORIDA LIMITED LIABILITY CO.
ALONZO HEALTH COVERAGES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION
OF
ALONZO HEALTH COVERAGES, LLC**

1. Name. The name of this limited liability company is **ALONZO HEALTH COVERAGES, LLC** (the "Company"), and it shall be formed as a limited liability company under Chapter 605 of the laws of the State of Florida.

2. Place of Principal Office. The mailing and street address of the Company's principal office is 6000 54th St. N., St. Petersburg, Florida 33709.

3. Registered Agent and Office. The name of the initial registered agent of the Company is **Spoor Law, P.A.** The street address of the initial registered agent of the Company is 877 Executive Center Dr. W., Suite 100, St. Petersburg, Florida 33702.

4. Management of the Company. The management of the Company shall be vested in the manager of the Company. The name and address of the initial manager of the Company is as follows:

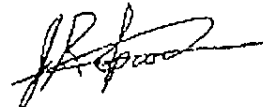
<u>Name</u>	<u>Address</u>	<u>Title</u>
Douglas Alonzo	6000 54 th St. N. St. Petersburg, Florida 33709	MGR

5. Duration. The Company shall exist from the date of filing of these Articles of Organization with the Florida Secretary of State, and the Company's existence shall be perpetual.

6. Purpose; Operating Agreement. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida. The members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned executed these Articles of Organization this 7th day of January, 2022.

In accordance with Section 605.0203(1)(b), *Florida Statutes*, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.55, F.S.



James R. Spoor,
Authorized Representative of Member

Jan. 7. 2022 5:03PM

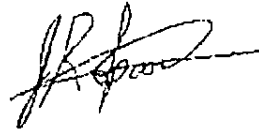
No. 1503 P. 3

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ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Spoor Law, P.A.



By: _____
James R. Spoor, President

Dated: January 7, 2022

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