

2022 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P20000083998

Entity Name: ALPHASLICE FITNESS, INC.

Current Principal Place of Business:

4989 NAVALI DRIVE
LAKE WORTH, FL 33467

Current Mailing Address:

4989 NAVALI DRIVE
LAKE WORTH, FL 33467 US

FEI Number: 85-3646968

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YOUNES, MOHAMAD E
4989 NAVALI DRIVE
LAKE WORTH, FL 33467 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: MOHAMAD YOUNES

10/12/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title MANAGER
Name YOUNES, MOHAMAD E
Address 4989 NAVALI DRIVE
City-State-Zip: LAKE WORTH FL 33467

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: MOHAMAD E YOUNES

MANAGER

10/12/2022

Electronic Signature of Signing Officer/Director Detail

Date