

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000320449

Entity Name: ALPHA HEALTH CENTER LLC

Current Principal Place of Business:

3600 SOUTH STATE ROAD 7
214
MIRAMAR, FL 33023

Current Mailing Address:

9760 ATLANTIC DR
MIRAMAR, FL 33025

FEI Number: 85-3625853

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASHLEY, MICHEL ANGE
9760 ATLANTIC DR
MIRAMAR, FL 33025 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: ASHLEY MICHEL ANGE

02/07/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MRG
Name ASHLEY, MICHEL ANGE
Address 9760 ATLANTIC DR
City-State-Zip: MIRAMAR FL 33025

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHEL ANGE ASHLEY

OWNER

02/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date