# Electronic Articles of Organization For Florida Limited Liability Company

L23000167497 FILED 8:00 AM April 04, 2023 Sec. Of State jsdennis

## **Article I**

The name of the Limited Liability Company is: ALPHA MALE CLINIC 2 LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is:

515 N FLAGLER DR STE P300 WEST PALM BEACH, FL. US 33401

The mailing address of the Limited Liability Company is:

4999 CAROLINA FOREST BLVD STE 9 MYRTLE BEACH, SC. US 29579

## **Article III**

The name and Florida street address of the registered agent is:

REPUBLIC REGISTERED AGENT LLC 1150 NW 72ND AVE TOWER I STE 455 MIAMI, FL. 33126

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.

Registered Agent Signature: LOVETTE DOBSON

## **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: AMBR STEPHANIE BUTLER 3762 CITATION WAY APT 1015 MYRTLE BEACH, SC. 29577 US

Title: AMBR BELAL KHOKHAR 1062 BRENTFORD PL MYRTLE BEACH, SC. 29579 US

Title: AMBR CLIFTON MACK 1273 BEACON CIR WELLINGTON, FL. 33414 US

Signature of member or an authorized representative

Electronic Signature: LOVETTE DOBSON

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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