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(City/State/Zip/Phone #)

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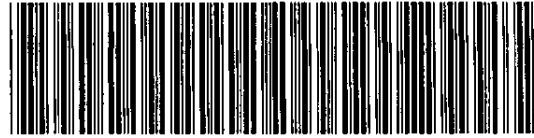
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1114



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 17, 2017

GENA PARKER
1255 COMMERCE DR
GULFSHORES, AL 36542

SUBJECT: LIFESTYLE & PERFORMANCE MEDICINE, L.L.C.
Ref. Number: W17000014091

We have received your document for LIFESTYLE & PERFORMANCE MEDICINE, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

Letter Number: 517A00003170

2017 FEB 28 PM 1:04
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lifestyle & Performance Medicine, L.L.C.

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Gena Parker

Name of Person

The McInnis Company, L.L.C.

Firm/Company

1255 Commerce Drive

Address

Gulf Shores, AL 36542

City/State and Zip Code

gena@mcinnis.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gena Parker

251
at ()

968-4331

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Lifestyle & Performance Medicine, L.L.C.

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Alabama

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-1043174

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 100 South Baylen Street

Pensacola, FL 32502

(Street Address of Principal Office)

6. 100 South Baylen Street

Pensacola, FL 32502

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: John M. McInnis, III

Office Address: 100 South Baylen Street

Pensacola, Florida 32502

(City)

(Zip code)

Registered agent's acceptance:

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 application, 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 relative 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's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

John M. McInnis, III, 29200 Canal Road, Orange Beach, AL 36561; Cameron Price, 28404 Burkhardt Drive

Orange Beach, AL 36561; Kevin Lacz, 1399 Players Club Court, Gulf Breeze, FL 32563

David LeMay, 2922 Greystone Drive, Pace, FL 32571

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.817.155, F.S.

John M. McInnis, III

Typed or printed name of signee

FILED
17 FEB 28 AM 7:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the
Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Lifestyle & Performance
Medicine, L.L.C. was formed in Baldwin County, Alabama on January 8, 2016.
The Alabama Entity Identification number for this entity is 355-633. I further
certify that the records do not disclose that said entity has been dissolved,
cancelled or terminated.



20170213000015640

**In Testimony Whereof, I have hereunto set my
hand and affixed the Great Seal of the State, at the
Capitol, in the city of Montgomery, on this day.**

2/13/2017

Date

A handwritten signature in cursive script that reads "J. H. Merrill".

John H. Merrill

Secretary of State