Mayooon

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	ıL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





400431896424

77/11/24--013/2--017 **125.01



T. LEMIEUX

JUL 1 6 2024



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the instructions to register a foreign limited liability company to transact business in Florida. The requirements are as follows:

Pursuant to s. 605.0902, Florida Statutes, the attached application must be completed in its entirety.

The foreign limited liability company must submit 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.

- The name of a limited liability company must be distinguishable on the records of the Florida Department of State. If the name of your limited liability company is not distinguishable on our records, you must adopt an alternative name to use in the state of Florida.
- The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," The abbreviation "L.L.C.," or the designation "LLC."

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

The fees to register are as follows:

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

> Important Information About the Requirement to File an Annual Report

All Foreign Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$138.75. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.

A COVER letter should be submitted along with the application, certificate, and check. The mailing address and courier address are noted below.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

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

COVER LETTER

.

TO:

U BJEC	Denali Heights Management, L	LC			
, Bo E C		Name of Limited Liability Company			
e enclo istence	osed "Application by Foreign Limite, and check are submitted to register	d Liability Company the above reference	for Authorizat d foreign limit	tion to Transact Business in Florida," Certificed liability company to transact business in I	icate c Florid
ase ret	urn all correspondence concerning t	his matter to the follo	owing:		
	Denise Klemczak				
		Name	of Person		
		Firm/0	Company		
	823 Spring Park Loop				
		A	ldress		
Celebration. FL, 34747					
		City/State	and Zip Code	<u> </u>	
	denise@vivoswellness.com				
	E-mail ac	dress: (to be used for	future annual	report notification)	
or furthe	er information concerning this matte	r, please call:			
	Zachary Orme	a	80 0	375-2453	
-	Name of Contact F		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	
	Tananasce, 115 ses			Tallahassee, FL 32301	
	Enclosed is a check for the followin Please make check payable to: FLC		ENT OF STAT	TF	

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Denali Heights Manage			
(Name of Foreign	Limited Liability Company; must include "Limi	ted Liability Company, T.E.C., or "LEC.)	
If name unavailable, enter alternate is	ume adopted for the purpose of transacting business in F	lorida. The alternate name must include "Limited Liabi	lity Company," "L.L.C." or "LLC.")
Alaska 2.		3	
(Jurisdiction under the law of wh	nch foreign limited hability company is organized)	(FEI numbe	r, if applicable)
4			
	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to deter	to registration.) mine penalty liability)	
200 W. 34th Ave., #97		6. 823 Spring Park Loop (Mailing Addre	_
(Street Address of F	rincipal Office)	(Mailing Addre	255)
Anchorage, AK 99503		Celebration. FL, 34747	
			20 ;
7 Name and street address	ss of Florida registered agent: (P.O. Bo	nx NOT accentable)	- L
7. Ivanic and street dadres	or riorida registered agent. (1.0. De	<u>1.0</u> uccopiacie)	9 = F
Name:	Denise Klemczak		ILED II PH 3: 43
Office Address:	823 Spring Park Loop		1.43 TATE
	Celebration	3 4747 , Florida	
	(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)

Title or Capacity:	Name and Address:	Title or Capacity:	
Manager	Name: Denise Klemczak	☐ Manager	Name: Jeffrey Klemczak
■Member	Address: 823 Spring Park Loop	Member	Address: 823 Spring Park Loop
Authorized	Celebration. FL, 34747	☐ Authorized	Celebration. FL, 34747
Person		Person	
Other	Other	Other	Other
☐Manager	Name:	Manager	Name:
Member	Address:	☐ Member	Address:
Authorized		☐ Authorized	
Person		Person	
Other	Other	Other	Other
Manager	Name:	Manager	Name:
Member	Address:	Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	Other
9. Attached is a cert jurisdiction under the of the translator mu 10. This document	Use an attachment to report more than six (6 may be added to the index when filing your difficate of existence, no more than 90 days one law of which it is organized. (If the certifiest be submitted) is executed in accordance with section 605.0 ment to the Department of State constitutes:	r Florida Department of State old, duly authenticated by the icate is in a foreign language 0203 (1) (b), Florida Statutes	e Annual Report form. e official having custody of records in the e, a translation of the certificate under oath . I am aware that any false information

Typed or printed name of signee



Alaska Entity #10272560

State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Denali Heights Management, LLC

This entity was formed on June 3, 2024 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective June 14, 2024.

Julie Sande Commissioner