



BA20250104525



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
LIMITED LIABILITY COMPANY

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20250104525

Date Filed: 1/15/2025

B3354-2362 01/15/2025 4:00 PM Received by California Secretary of State

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| Entity Details | |
| Limited Liability Company Name | INTEGRATIVE WELLNESS PHYSICIAN ASSOCIATE SERVICES LLC |
| Entity No. | 202565315076 |
| Formed In | CALIFORNIA |
| Street Address of Principal Office of LLC | |
| Principal Address | 3454 CERRITOS AVE LONG BEACH, CA 90807 |
| Mailing Address of LLC | |
| Mailing Address | 3454 CERRITOS AVE LONG BEACH, CA 90807 |
| Attention | CRYSTAL MACIEL |
| Street Address of California Office of LLC | |
| Street Address of California Office | 3454 CERRITOS AVE LONG BEACH, CA 90807 |
| Manager(s) or Member(s) | |
| Manager or Member Name | Manager or Member Address |
| + CRYSTAL A MACIEL | 3454 CERRITOS AVE LONG BEACH, CA 90807 |
| Agent for Service of Process | |
| Agent Name | PORTIA C MOORE |
| Agent Address | 5200 CLARK AVE UNIT 478 LAKEWOOD, CA 90714 |
| Type of Business | |
| Type of Business | PHYSICIAN ASSOCIATE SERVICES |
| Email Notifications | |
| Opt-in Email Notifications | Yes, I opt-in to receive entity notifications via email. |
| Chief Executive Officer (CEO) | |
| CEO Name | CEO Address |
| None Entered | |
| Labor Judgment | |
| No Manager or Member, as further defined by California Corporations Code section 17702.09(a)(8), has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal is pending, for the violation of any wage order or provision of the Labor Code. | |

Electronic Signature

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

PORTIA C MOORE

01/15/2025

Signature

Date