

LO7000003411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

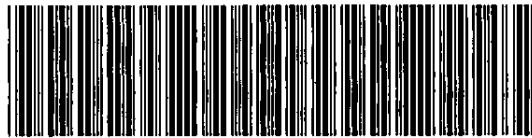
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

APR 6 2010

EXAMINER

STONE & GERKEN, P.A.

ATTORNEYS AT LAW

4850 N. Highway 19A
Mount Dora, Florida 32757
(352) 357-0330
Main Office Fax (352) 357-2474
Lakeside Office Fax (352) 357-5445

LEWIS W. STONE
SCOTT A. GERKEN

KATRINA M. THOMAS
KEVIN M. STONE

March 29, 2010

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: **ALPHA PARTNERS, LLC**

Dear Sirs:

Enclosed please find the original Statement of Change of Registered Agent for filing regarding the above-referenced limited liability company. Also enclosed is our firm check in the amount of \$25.00 to cover the filing fee.

As always, please do not hesitate to call with any questions or concerns.

Very truly yours,


Scott A. Gerken

SAG:cak
Enclosures

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Alpha Partners, LLC

2. (a) Principal office address of limited liability company: 2101 Prevatt Street
 Eustis, FL 32726
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 2101 Prevatt Street
 Eustis, FL 32726
(Note: MAY BE POST OFFICE BOX)

01/09/2007
3. Date of filing/registration in Florida

L07000003411
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Agent: James F. Heekin, Jr.
Registered Office Address: 215 N. Eola Drive
Orlando, FL 32801

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
NEW Registered Agent: Scott A. Gerken
NEW Registered Office Address: 4850 N. Highway 19A
(MUST BE FLORIDA STREET ADDRESS) Mount Dora, FL 32757

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Steven Tang ✓
Signature of a member or authorized representative of a member
Steven Tang
Printed or typed name of signer

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
Steven Tang
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

