I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

SIGNATURE: ANDREW STORCH

Electronic Signature of Signing Officer/Director Detail

Entity Name: ALPINE MOTORS, INC.

Current Principal Place of Business:

6606 NORTH ANDREWS AVE. FORT LAUDERDALE, FL 33309

Current Mailing Address:

6606 NORTH ANDREWS AVE. FORT LAUDERDALE. FL 33309

FEI Number: 59-1492081

Name and Address of Current Registered Agent:

ULBRICH, JOHN 6606 NORTH ANDREWS AVE. FT. LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PD	Title	ST
Name	ULBRICH, JOHN O	Name	STORCH, ANDREW H
Address	1645 S. OCEAN LANE	Address	6606 N. ANDREWS AVE.
City-State-Zip:	FT. LAUDERDALE FL	City-State-Zip:	FORT LAUDERDALE FL 33309

Certificate of Status Desired: No

Date

01/16/2014

FILED Jan 16, 2014 Secretary of State CC0037880589

Date

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# 434673

SECRETARY