

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017008

Entity Name: ALPHA , LLC

Current Principal Place of Business:

2034 TANGLEWOOD DR NE
ST.PETERSBURG, FL 33702

Current Mailing Address:

PO BOX 22782
ST.PETERSBURG, FL 33742

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VASSILEV, EVELINA V
2034 TANGLEWOOD DR. NE
ST. PETERSBURG, FL 33702 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

_____ Date

Authorized Person(s) Detail :

Title MGR
Name VASSILEV, EVELINA V
Address PO BOX 22782
City-State-Zip: ST.PETERSBURG FL 33742

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EVELINA V. VASSILEV

MGR

01/13/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date