## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025597

Entity Name: ALPHA MANAGEMENT LLC

**Current Principal Place of Business:** 

830 BAYRIDGE LANE PORT ORANGE. FL 32127

**Current Mailing Address:** 

830 BAYRIDGE LANE

PORT ORANGE. FL 32127 US

FEI Number: 20-0698076 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYER, SHARON A 830 BAYRIDGE LANE PORT ORANGE, FL 32127 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: SHARON A BOYER 01/24/2020

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title PRES

Name BOYER, SHARON A Address 830 BAYRIDGE LANE

City-State-Zip: PORT ORANGE FL 32127

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: SHARON A BOYER PRESIDENT

Electronic Signature of Signing Authorized Person(s) Detail

01/24/2020 Date

FILED Jan 24, 2020

**Secretary of State** 

7649037866CC

Date