

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000076535

**Entity Name:** ALPHA, LLC

**Current Principal Place of Business:**

2555 COLLINS AVENUE #1709  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

2555 COLLINS AVENUE #1709  
MIAMI BEACH, FL 33140 US

**FEI Number:** 20-3251671

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ALFREDO GARCIA-MENOCAL, P.A.  
730 NW 107TH AVENUE  
SUITE 115  
MIAMI, FL 33172 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	Title	MANAGER
Name	CRUZ, RICARDO	Name	CRUZ, VICTOR M
Address	2555 COLLINS AVENUE #1709	Address	CALLE 113 BW-7 VALLE ARRIBA HEIGHTS
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	CAROLINA PUERTO RICO 00983

*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:** RICARDO CRUZ

MGR

02/18/2023

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date