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: ALFONSO SIERRA

Electronic Signature of Signing Authorized Person(s) Detail

MGRM

Date

4

Jan 14, 2014 Secretary of State CC2603142163

FILED

Certificate of Status Desired: No

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:	SIERRA ALFONSO			01/14/2014
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	SIERRA, ALFONSO	Name	MARIANA, GARCIA	
Address	20900 NE 30TH AVE 809	Address	17001 COLLINS AVE 2804	
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	SUNNY ISLES FL 33160	

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000105560

Entity Name: ALFA MUTUAL CAPITAL, LLC

Current Principal Place of Business:

20900 NE 30TH AVE **STE 809** AVENTURA, FL 33180

Current Mailing Address:

20900 NE 30TH AVE **STE 809** AVENTURA, FL 33180 US

FEI Number: 27-1227232

Name and Address of Current Registered Agent:

SIERRA, ALFONSO 20900 NE 30TH AVE STE 809 AVENTURA, FL 33180 US