

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000030565

**Entity Name:** FUND FV AV ALPHA III LLC

**Current Principal Place of Business:**

7760 NW 56 ST  
DORAL, FL 33166

**Current Mailing Address:**

7760 NW 56 ST  
DORAL, FL 33166 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

VILLASANTE, FRANCISCO  
7760 NW 56 ST  
DORAL, FL 33166 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	MGRM	Title	MGRM
Name	FRANCISCO J. VILLASANTE REVOCABLE TRUST	Name	ALINA C. VILLASANTE REVOCABLE TRUST
Address	7760 NW 56 ST	Address	7760 NW 56 ST
City-State-Zip:	DORAL FL 33166	City-State-Zip:	DORAL FL 33166

*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:** FRANCISCO VILLASANTE

MGR

03/28/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date