

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000109687

**Entity Name:** ALPHA DEVELOP LLC

**Current Principal Place of Business:**

55 MERRICK WAY  
SUITE 738  
CORAL GABLES, FL 33134

**Current Mailing Address:**

P.O. BOX 347494  
MIAMI, FL 33234

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ADAMS, ALEXANDER W  
55 MERRICK WAY  
#738  
CORAL GABLES, FL 33134 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  
Name ADAMS, ALEXANDER W  
Address P.O. BOX 34794  
City-State-Zip: MIAMI FL 33234

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALEXANDER ADAMS

MGRM

03/19/2013

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

\_\_\_\_\_  
Date