| 2019 | FI ORIDA | I IABII ITY | COMPANY | ΔΝΝΙΙΔΙ | RFPORT |
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| 2013 | | | | ANNOAL | |

DOCUMENT# L12000136139

Entity Name: ALPHA WAY, LLC

Current Principal Place of Business:

7901 KINGSPOINTE PKWY STE 17 ORLANDO, FL 32819

Current Mailing Address:

7901 KINGSPOINTE PKWY STE 17 ORLANDO, FL 32819 US

FEI Number: 46-1278498

Name and Address of Current Registered Agent:

LARSON ACCOUNTING GROUP 7901 KINGSPOINTE PKWY STE 17 ORLANDO, FL 32819 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 | E CAROLINE G LARSON | | | | |
|-----------------|--|-----------------|------------------------------|--|--|
| | Electronic Signature of Registered Agent | | Date | | |
| Authorized F | Person(s) Detail : | | | | |
| Title | AMBR | Title | MGR | | |
| Name | DOS SANTOS, SANDRO C | Name | MENDONCA, ANAI B | | |
| Address | 7901 KINGSPOINTE PKWY STE 17 | Address | 7901 KINGSPOINTE PKWY STE 17 | | |
| City-State-Zip: | ORLANDO FL 32819 | City-State-Zip: | ORLANDO FL 32819 | | |

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: DOS SANTOS , SANDRO C

AMBR

03/27/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Mar 27, 2019 Secretary of State 5709014066CC

Certificate of Status Desired: No