

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000011041

Entity Name: ALPHA ALLIANCE LLC

Current Principal Place of Business:

5105 PRESIDENTIAL STREET
SEFFNER, FL 33584

Current Mailing Address:

5105 PRESIDENTIAL STREET
SEFFNER, FL 33584 US

FEI Number: 46-1243556

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRESSON, AUDREY M
5105 PRESIDENTIAL STREET
SEFFNER, FL 33584 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, AUTHORIZED
REPRESENTATIVE, AUTHORIZED
MEMBER
Name KOPECKY, PETER
Address 5105 PRESIDENTIAL STREET
City-State-Zip: SEFFNER FL 33584

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: PETER KOPECKY

REGISTERED AGENT

04/15/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date