

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000169375

**Entity Name:** ALPAKA, LLC

**Current Principal Place of Business:**

% THERREL BAISDEN, P.A.  
ONE SE 3RD AVE - STE 2950  
MIAMI, FL 33131

**Current Mailing Address:**

% THERREL BAISDEN, P.A.  
ONE SE 3RD AVE - STE 2950  
MIAMI, FL 33131

**FEI Number:** 46-4275664

**Certificate of Status Desired:** No

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

THERREL BAISDEN, P.A.  
SUNTRUST INTERNATIONAL CENTER  
ONE SE 3RD AVE - STE 2950  
MIAMI, FL 33131 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  
Name GARZON, ISAAC  
Address 17001 COLLINS AVE - APT 2307  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGR  
Name GARZON, LYNN  
Address 17001 COLLINS AVE - APT 2307  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** ISAAC GARZON

**DIRECTOR**

**02/09/2017**

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

\_\_\_\_\_  
Date