2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2018
Secretary of State
CC8098409913

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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

Title	MANAGER
Name	GARZON, ALAN PHILIP
Address	% THERREL BAISDEN, P.A. ONE SE 3RD AVE - STE 2950
City-State-Zip:	MIAMI FL 33131

Title	MANAGER
Name	GARZON, PAUL BERNARD
Address	% THERREL BAISDEN, P.A. ONE SE 3RD AVE - STE 2950
City-State-Zip:	MIAMI FL 33131

Title	MANAGER
Name	GARZON, KAREN ILANA
Address	% THERREL BAISDEN, P.A. ONE SE 3RD AVE - STE 2950
City-State-Zip:	MIAMI FL 33131

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 MANAGER 01/23/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date