

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000107645

**Entity Name:** ALLIANCE MULTIFAMILY FRAMING LLC

**Current Principal Place of Business:**

9406 WENDOVER CT.  
JONESBORO, GA 30236

**Current Mailing Address:**

9406 WENDOVER CT.  
JONESBORO, GA 30236 US

**FEI Number:** 47-3429551

**Certificate of Status Desired:** Yes

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

LEE, GEOFFREY B  
2551 E GOLF BLVD  
POMPANO BEACH , FL 33064 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:** GEOFFREY LEE

04/30/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	CEO	Title	CFO
Name	LEE, GEOFFREY B	Name	THAL, ALICE E
Address	9406 WENDOVER CT.	Address	9406 WENDOVER CT.
City-State-Zip:	JONESBORO GA 30236	City-State-Zip:	JONESBORO GA 30236

*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:** GEOFFREY LEE

CEO

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date