9406 WEND JONESBOR	OVER CT. O, GA 30236 US			
FEI Number: 47-3429551			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
LEE, GEOFFRI 2551 E GOLF E POMPANO BE				
The above name	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of F	ilorida.
	d entity submits this statement for the purpose of changing its regis E: GEOFFREY LEE	stered office or regis	tered agent, or both, in the State of F	lorida. 04/30/2024
		stered office or regis	tered agent, or both, in the State of F	
SIGNATUR	E: GEOFFREY LEE	stered office or regis	tered agent, or both, in the State of F	04/30/2024
SIGNATUR	E: GEOFFREY LEE Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of F	04/30/2024
SIGNATURE Authorized	E: GEOFFREY LEE Electronic Signature of Registered Agent Person(s) Detail :			04/30/2024
SIGNATURE Authorized	E: GEOFFREY LEE Electronic Signature of Registered Agent Person(s) Detail : CEO	Title	CFO	04/30/2024

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

Electronic Signature of Signing Authorized Person(s) Detail

2024 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:

04/30/2024 Date

MGR