

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000009521

**Entity Name:** ALFA PARCEL SERVICE LLC

**Current Principal Place of Business:**

5030 CHAMPION BLVD.STE. G11-216  
BOCA RATON, FL 33496

**Current Mailing Address:**

5030 CHAMPION BLVD.STE. G11-216  
BOCA RATON, FL 33496 US

**FEI Number:** 47-2908914

**Certificate of Status Desired:** Yes

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

LEGALINC CORPORATE SERVICES, INC.  
5237 SUMMERLIN COMMONS  
SUITE 400  
FORT MYERS, FL 33907 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            AMBR  
Name            RUNKEVICH, ANASTASIIA  
Address        5030 CHAMPION BLVD.STE. G11-216  
City-State-Zip: BOCA RATON FL 33496

Title            AMBR  
Name            RUNKEVICH, VIACHESLAV  
Address        330 NW 67TH ST, APT 207  
City-State-Zip: BOCA RATON FL 33487

Title            AMBR  
Name            RUNKEVICH, ALICE O  
Address        330 NW 67TH ST, APT 207  
City-State-Zip: BOCA RATON FL 33487

*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:** VIACHESLAV RUNKEVICH

AMBR

04/04/2017

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

\_\_\_\_\_  
Date