

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000170888

Entity Name: ALPHA PRIME LOGISTICS, LLC

Current Principal Place of Business:

3601 KERMAN BLVD S. UNIT 1932
JACKSONVILLE, FL 32224

Current Mailing Address:

3545 ST. JOHNS BLUFF RD. S.
SUITE 258
JACKSONVILLE, FL 32224 US

FEI Number: 47-5266565

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA INC
2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 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 OSPINA, CARLOS
Address 10795 NW 50TH ST APT 207
City-State-Zip: DORAL FL 33178

Title AMBR
Name ROMERO, JOSE FELIPE
Address 10720 NW 66TH ST APT 204
City-State-Zip: DORAL FL 33178

Title AMBR
Name ROMERO, JUAN CAMILO
Address 2346 IRONSTONE DR W
City-State-Zip: JACKSONVILLE FL 32246

Title AMBR
Name MENESES, ASTRID
Address 10720 NW 66TH ST
APT 204
City-State-Zip: DORAL FL 33178

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: CARLOS OSPINA

AMBR

01/20/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date