

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000139930

**Entity Name:** ALPHALIT TAMPA BAY LLC

**Current Principal Place of Business:**

5885 CENTRAL AVE, STE A  
ST PETERSBURG, FL 33710

**Current Mailing Address:**

5885 CENTRAL AVE, STE A  
ST PETERSBURG, FL 33710 UN

**FEI Number:** 86-2896824

**Certificate of Status Desired:** No

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

LODEN, SCOTT  
5885 CENTRAL AVE, STE A  
ST PETERSBURG, FL 33710 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	Title	MGR
Name	NEHEMIAH'S DREAM LLC	Name	SALTY RODS LLC
Address	5885 CENTRAL AVE, STE A	Address	8155 ROBIN RD
City-State-Zip:	ST PETERSBURG FL 33710	City-State-Zip:	SEMINOLE FL 33777

*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:** SCOTT LODEN

**MEMBER**

**04/22/2022**

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

\_\_\_\_\_  
Date