

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000142297

**Entity Name:** ALPHA PERFORMANCE PRODUCTS LLC

**Current Principal Place of Business:**

500 VILLAGE SQUARE CROSSING  
203  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

500 VILLAGE SQUARE CROSSING  
203  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 88-1775988

**Certificate of Status Desired:** No

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

MORRISON, TIMOTHY  
500 VILLAGE SQUARE CROSSING  
203  
PALM BEACH GARDENS, FL 33410 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  
Name MORRISON, TIMOTHY  
Address 14283 ARDEL DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGR  
Name ANDERSON, JASON  
Address 2263 NORTH WALLEN DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title AMBR  
Name RK MORRSION INC  
Address 14283 ARDEL DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title AMBR  
Name GUARDIAN PERFORMANCE  
COATINGS LLC  
Address 2263 NORTH WALLEN DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** JASON ANDERSON

**CO-OWNER**

**04/03/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date