

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000002356

**Entity Name:** ALPHA FACILITIES SOLUTIONS, LLC**Current Principal Place of Business:**4085 CIBOLO CANYONS, SUITE 200  
SAN ANTONIO, TX 78261**Current Mailing Address:**4085 CIBOLO CANYONS, SUITE 200  
SAN ANTONIO, TX 78261 US**FEI Number:** 26-0845867**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROBERTS, RUSSELL  
230 GALLEON DRIVE  
POINT VEDRA, FL 32081 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:** RUSSELL ROBERTS

07/23/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MD
Name	GARCIA, JOHN A
Address	4085 CIBOLO CANYONS, SUITE 200
City-State-Zip:	SAN ANTONIO TX 78261

Title	MD
Name	GARCIA, JOHN A
Address	4085 CIBOLO CANYONS, SUITE 200
City-State-Zip:	SAN ANTONIO TX 78261

Title	OPERATIONS DIRECTOR
Name	GARCIA, KATHLEEN I
Address	4085 CIBOLO CANYONS, SUITE 200
City-State-Zip:	SAN ANTONIO TX 78261

*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:** KATHLEEN I. GARCIA**OPERATIONS DIRECTOR** 07/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date