## 2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000002356

Entity Name: ALPHA FACILITIES SOLUTIONS, LLC

FILED
Jan 19, 2018
Secretary of State
CC8795242240

## **Current Principal Place of Business:**

11530 N.W. MILITARY HWY., SUITE 300 SAN ANTONIO. TX 78231

## **Current Mailing Address:**

11530 N.W. MILITARY HWY., SUITE300 SAN ANTONIO, TX 78231 US

FEI Number: 26-0845867 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CLINCHARD, CHARLES H 398 MONTECITO DRIVE SATELLITE BEACH, FL 32937 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 MD Title MD

Name GARCIA, JOHN A Name GARCIA, JOHN A

Address 11503 NW MILITARY HWY, SUITE 300 Address 11503 NW MILITARY HWY, SUITE 300

City-State-Zip: SAN ANTONIO TX 78231 City-State-Zip: SAN ANTONIO TX 78231

Title OPERATIONS DIRECTOR
Name GARCIA, KATHLEEN I

Address 11530 N.W. MILITARY HWY., SUITE

300

City-State-Zip: SAN ANTONIO TX 78231

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 01/19/2018

Date