

L030000000774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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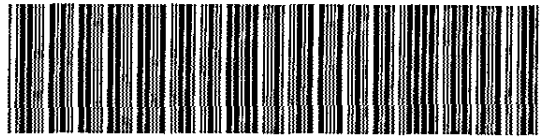
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN JUL - 9 2003

J. BRYAN SEP 10 2003

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALPHA FINANCIAL GROUP LLC & AFG-I, LLC
(Name of corporation)

DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHARLES T. SANTOS
(Name of person)

AFG, LLC & AFG I, LLC
(Name of firm/company)

12071 FAMBRIDGE RD.
(Address)

ORLANDO, FL 32837
(City/state and zip code)

For further information concerning this matter, please call:

CHARLES SANTOS at (407) 240-1536
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 9, 2003

CHARLES T. SANTOS
ALPHA FINANCIAL GROUP, LLC
12071 FAMBRIDGE ROAD
ORLANDO, FL 32837

SUBJECT: ALPHA FINANCIAL GROUP, LLC
Ref. Number: L03000000774

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for ALPHA FINANCIAL GROUP, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 603A00040664



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 21, 2003

CHARLES T. SANTOS
ALPHA FINANCIAL GROUP, LLC
12071 FAMRIDGE ROAD
ORLANDO, FL 32837

SUBJECT: ALPHA FINANCIAL GROUP, LLC
Ref. Number: L03000000774

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Please accept our apology for failing to mention this in our previous letter.

You completed the form for a corporation not a limited liability company.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call
(850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 503A00042463

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: ALPHA FINANCIAL GROUP, LLC

2. The mailing address of the limited liability company is: 12071 FAMBIDGE RD
ORLANDO, FL 32837

1/7/03
3. Date of filing/registration in Florida

EO3000000774
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

THE BUSINESS LAW GROUP

Name

455 S. ORANGE AVE. SUITE 500

Address

ORLANDO, FL 32801

City, State and Zip

6. The name and address of the new registered agent and/or office:

CHARLES T. SANTOS

Name

12071 FAMBIDGE RD

Florida street address (P.O. Box NOT acceptable)

ORLANDO FL 32837

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
(Signature of a member or authorized representative of a member)

CHARLES T. SANTOS
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA