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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ALPHA DEA	POT LLC d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
EDUARDO E DIEPPA III Name of Person	<u> </u>
DIEPPA LAW FIRM P.A. Firm/Company	
2095 WEST 76 STREET Address	
HIALEAH FL 33016 City/State and Zip Code	
EDIEPPA@DIEPPALAW.COM E-mail address: (to be used for future annual report notification	on)
For further information concerning this matter, ple	ase call:
EDUARDO E DIEPPA III at (_	305) 826-8266
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amo	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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. Name of the limited liability company: ALPHA	DEPOT LLC
2. (a) Principal office address of limited liability compan	1 . 1 . m
(Note: MUST BE STREET ADDRESS)	N MIAMI FL 33161
(b) Mailing address of limited liability company:	SAME AS (A)
(Note: MAY BE POST OFFICE BOX)	
3. Date of filing/registration in Florida	L D 7 0 0 0 0 3 8 5 9 4 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	JRC SERVICES ONLINE LL
Registered Office Address:	14137 NE 3 CT N MIAMI FL 33/61
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent: <u>NEW Registered Office Address:</u> <u>(MUST BE FLORIDA STREET ADDRESS)</u>	DIEPPA LAW FIRM P.A.
	2095 WEST 76 STREET
	HIALEAH ,FL33016
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company	HIALEAH ,FL 33016 laws of the State of Florida, it is hereby florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization y.
Signature of a member or authorized representative of a member	laws of the State of Florida, it is hereby florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization y.
son for the	laws of the State of Florida, it is hereby florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization y.
Signature of a member or authorized representative of a member JEAN CHARLES	laws of the State of Florida, it is hereby florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization y.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00