

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000040466

Entity Name: ALPHA WARESHOP LLC

**FILED**  
**Jul 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

710 ARIANNE COURT  
LEHIGH ACRES, FL 33936 US

**New Principal Place of Business:**

**Current Mailing Address:**

710 ARIANNE COURT  
LEHIGH ACRES, FL 33936 US

**New Mailing Address:**

FEI Number: 26-4821526

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

RIB, JULIO  
710 ARIANNE COURT  
LEHIGH ACRES, FL 33936 US

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

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: JULIO RIB

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: RIB, JULIO  
Address: 710 ARIANNE COURT  
City-St-Zip: LEHIGH ACRES, FL 33936 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JULIO RIB

MGRM

07/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date