

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000059786

Entity Name: ALPHA INSURANCE LLC

FILED
Oct 17, 2014
Secretary of State

Current Principal Place of Business:

4626 CLYDE MORRIS - # 3
PORT ORANGE, FL 32129 US

New Principal Place of Business:

7325 SOUTH RED BIRD CIRCLE
HOBE SOUND, FL 33455 US

Current Mailing Address:

90 GLENWOOD AVE
QUEENSBURY, NY 12804 US

New Mailing Address:

FEI Number: 45-5256951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANAPE, VERNON J JR
7325 S RED BIRD CIR
HOBE SOUND, FL 334556040 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: VERNON J CANAPE JR

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: MGRM
Name: CANAPE, VERNON J JR
Address: 7325 S RED BIRD CIR
City-St-Zip: HOBE SOUND, FL 334556040 US

Title: MGRM
Name: CANAPE, MICHAEL J
Address: 7325 S RED BIRD CIR
City-St-Zip: HOBE SOUND, FL 334556040 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: MICHAEL J CANAPE

MGRM

10/17/2014

Electronic Signature of Authorized Person

Date