

L15000202459

Florida Department of State
Division of Corporations
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FLORIDA LIMITED LIABILITY CO.

ALPA INVESTMENT LLC

Certificate of Status	0
Certified Copy	1
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15 DEC -8 PM 2:52
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15 DEC -8 AM 9:43
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



December 8, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: ALPA LLC
REF: W15000078945

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is 62321 (ALPA, INC.).

If you have any further questions concerning your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

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Letter Number: 415A00025612

P.O. BOX 6327 - Tallahassee, Florida 32314

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15 DEC -8 AM 9:43
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

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ARTICLE I - Name:

The name of the Limited Liability Company is:

ALPA INVESTMENT LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

7601 E. Treasure Drive, #716
North Bay Village, FL 33141

7601 E. Treasure Drive, #716
North Bay Village, FL 33141

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

LUIS ALBERTO PARTY

Name

7601 E. Treasure Drive, #716

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

North Bay Village FL 33141
City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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 605, F.S.

3
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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PREPARED BY:

RUBEN E. DORTA, P.A.
6011 West 16 Avenue
Hialeah, FL 33012
Phone: 305-557-3332
FBN: 441066

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:
"AMBR" = Authorized Member
"MGR" = Manager
MGR

Name and Address:

LUIS ALBERTO PARTY
7601 E. TREASURE DRIVE, #716
NORTH BAY VILLAGE, FL 33141

MGR

GRACIELA MARIA DESTEFANIS
7601 E. TREASURE DRIVE, #716
NORTH BAY VILLAGE, FL 33141

MGR

LORENZO PEREZ
6011 WEST 16 AVENUE
HIWEEAH, FL 33012

(Use attachment if necessary)


ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.

Luis Alberto Party
Typed or printed name of signat

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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