(Requestor's Name)						
(Address)						
(Ad	dress)					
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate	s of Status				
Special Instructions to Filing Officer:						
		·				

Office Use Only



400289985124

09/14/16--01024--025 **25.00

SEP 15 2016 S. YOUNG

COVER LETTER

Division of Corp	porations						
SUBJECT: ALP		BS PROPERTI	es, LLC				
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.					
Please return all correspondence concerning this matter to the following:							
	Guiller	2mo Pewn Name of Person	PERTIES, LLC SECRETARIASSEE				
	ALPHA M	1070ES PROP Firm/Company	PERTIES, LLC				
	13 250	NW 7th Ad Address	SEP 14				
		City/State and Zip Code ANX ANOTMAL to be used for future annual report notif					
For further information concerning this matter, please call:							
		at (<u>780</u>) <u>55 4</u> Area Code Daytime	Telephone Number				
Enclosed is a check for th	e following amount:						
☑ S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fec & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

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

TO:

Registration Section'

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CORRECTION FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuan	t to se	ction 605.0209, F.S., this document is being sub	omitted to correct a previously filed docum	ent.	
FIRST:	The n	ame of the limited liability company is:			
SECON	<u>(D:</u>	The Florida Document number of the limited	I liability company is:		
THIRD	<u>;</u> ;	Document to be corrected is:			
	!	CHECK THE APPROPRIATE BOX AND C	COMPLETE THE APPLICABLE STA	TEMENT PS	
		nins an incorrect statement. The incorrect statenment are as follows:	nent, the reason the statement is incorrect,	and the corrected in SSE OF	
		1 - P-2-71		# 1. OR HELD A	
	<u>OR</u>				
X		defectively signed. The manner in which the do lows: When the LLE Co DY MISTAKE Wrom on the Electronic			
		electronic transmission of the record was defecting the second was defecting to the second was defecting the second was defected was de		12016	
		new registered agent, if applicable :(NOTE: if codesignation).	orrecting the registered agent, the new reg	istered agent must sign	
I hereby provisio obligati	y accep ons of ions of a chan	ed Agent's Signature, it changing Registered Apply the appointment as registered agent and agreal statutes relative to the proper and complete point in as registered agent as provided for ge in the registered office address, I hereby continuation.	e to act in this capacity. I further agree to performance of my duties, and I am famili in Chapter 605, F.S. Or, if this document	ar with and accept the is being filed to merely	
		No. Sec. 19	A A court's Circustoms		
Registered Agent's Signature					
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)		