

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L19000071401  
FILED 8:00 AM  
March 13, 2019  
Sec. Of State  
kbrumbley

**Article I**

The name of the Limited Liability Company is:  
ALPHA PROFESSIONAL TRUST, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
6838 AXIS WEST CIRCLE  
SUITE 2410  
ORLANDO, FL. 32821

The mailing address of the Limited Liability Company is:  
6838 AXIS WEST CIRCLE  
SUITE 2410  
ORLANDO, FL. 32821

**Article III**

The name and Florida street address of the registered agent is:  
CAROLINA LOMELLI  
7911 N MARBELLA CT  
ORLANDO, FL. 32836

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.

Registered Agent Signature: CAROLINA LOMELLI

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: MGR  
PLAZA ANDRE  
6838 AXIS WEST CIRCLE SUITE 2410  
ORLANDO, FL. 32821

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### **Article V**

The effective date for this Limited Liability Company shall be:

03/07/2019

Signature of member or an authorized representative

Electronic Signature: CAROLINA LOMELLI

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.