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(Requestor's Name)				
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(Business Entity Name)				
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Certified Copies Certificates of Status	_			
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SECRETATA OF STATE



COVER LETTER			
TO: Registration Section Division of Corporations			
SUBJECT: Alpha Service Group, LLC			
(Name of Limited Liability Company)			
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
Toma & Janet Faur			
(Name of Person)			
Alpha Service Group, LLC			
(Firm/Company)			
700 NE 69th St.			
(Address)			
Boca Raton, FL 22487			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Toma Faur at (561) 982-9968			
(Name of Person) (Area Code & Daytime Telephone Number)			
MAILING ADDRESS: STREET ADDRESS:			
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\Begin{align*} \Boxed{155.00} \text{Filing Fee} & \Boxed{155.00} \text{Filing Fee} & \Boxed{160.00} \text{Filing Fee}, Certificate \text{Certified Copy} \text{of Status & Certified Copy} of			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Alpha Service Group, LLC		
•	n Limited Liability Company)	
Nevada	3.	
(Jurisdiction under the law of which foreign limited company is organized)	3. (FEI number, if applicable)	
August 1, 2005	5. Perpetual	_
(Date of Organization)	(Duration: Year limited liability company wi exist or "perpensal")	Il cease to
(Date first transacted bus	iness in Florida, if prior to registration.)	
(See sections 608.501 & 60	08.502 F.S. to determine penalty liability)	
700 NE 69th St.		
Boca Raton, FL 22487		
(Stree	et Address of Principal Office)	
. If limited liability company is a manager-	managed company, check here	
. The name and usual business addresses of	the managing members or managers are as follow	'5;
Toma & Janet Faur		
700 NE 69th St.		
Boca Raton, FL 22487		
Doca Naton, 1 E 22-107		
e jurisdiction under the law of which it is organized. (A	rethan 90 days old, duly authenticated by the official having ou A photocopy is not acceptable. If the certificate is in a foreign ta	
nslation of the certificate under eath of the translator m	aust be submitted.)	
l. Nature of business or purposes to be con-	ducted or promoted in Florida:	
Real Estate Investment		
\bigcap_{i}	+ F John - much	
Signatura of or amban	or an authorized representative of a member.	<u> </u>
Signature of a greeneer (In accordance with section 60	8.408(3), F.S., the execution of this document constitutes	** **
	ldes of perjury that the facts stated herein are true.)	_^=
<i></i>	HUE I HAUK	SS S
Typed o	or printed name of signee	<u>i;;; </u>

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 508.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Alpha Service Group, LLC

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

JANET FAUR (Name)

700 NE 694 STREET

Fiorida Street Address (P.O. Bux NOT ACCEPTABLE)

BOCA ROTON FL FU 33 487

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 608, Florida Statutes.

Janet Jean Trustee (Signature)

AHASSEE, FLORIDA

05 DEC 12 AM 10: 15

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, ALPHA SERVICE GROUP, LLC., as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 1, 2005, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on November 9, 2005.

DEAN HELLER

Secretary of State

ertification Clerk

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