I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELSA A. VAN RYDER-LEE

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: ALCAGISA HOLDING GROUP, LLC.

Current Principal Place of Business:

108 MARCIA DR -C/O ANTONIO LEMUS CPA PA ALTAMONTE SPRINGS. FL 32714

Current Mailing Address:

DOCUMENT# L08000050472

108 MARCIA DR -C/O ANTONIO LEMUS CPA PA ALTAMONTE SPRINGS. FL 32714

FEI Number: 26-2662684

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

ANTONIO LEMUS CPA PA **108 MARCIA DRIVE** ALTAMONTE SPRINGS, FL 32714 US

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:

Authorized Person(s) Detail :

Title	MANAGER, AUTHORIZED MEMBER	Title	MANAGER
Name	BOREA, ALBERTO A	Name	VAN RYDER-LEE, ELSA A. MANAGER
Address	499 BLACKWOOD AVE	Address	231 COPPER OAK CT
City-State-Zip:	LONGWOOD FL 32750	City-State-Zip:	APOPKA FL 32703

MANAGER

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 05, 2017 Secretary of State CC2397205368

Certificate of Status Desired: No

Date

04/05/2017 Date