## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000482831

Entity Name: ALPHA AUTO COLLECTION LLC

**Current Principal Place of Business:** 

5925 PRECISION DR #102 ORLANDO, FL 32819

**Current Mailing Address:** 

5925 PRECISION DR #102 ORLANDO, FL 32819 US

FEI Number: 93-4074186 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOGAS, PHILLIP 1525 INTERNATIONAL PKWY SUITE 4021 LAKE MARY, FL 32746 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:

Electronic Signature of Registered Agent

Date

**FILED** Jan 28, 2025

**Secretary of State** 

8870196777CC

Authorized Person(s) Detail:

**AUTHORIZED REPRESENTATIVE** Title MANAGER Title

SURPRENANT, JAMES Name HEALY, STEPHEN Name

5925 PRECISION DR #102 Address 5925 PRECISION DR #102 Address

City-State-Zip: FLORIDA FL 32819 FLORIDA FL 32819 City-State-Zip:

Title AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE Title

Name HEALY, STEPHEN Name HUSSAIN, AAMER

Address 1921 MAGUIRE ROAD Address 5925 PRECISION DR #102

STE 104 FLORIDA FL 32819

City-State-Zip: City-State-Zip: WINDERMERE FL 32746

Title COMPTROLLER DOWNS, TRICIA A Name

5925 PRECISION DR #102 Address City-State-Zip: ORLANDO FL 32819

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: STEPHEN HEALY

**AUTHORIZED** REPRESENTATIVE 01/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date