

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000000104

**Entity Name:** SAN ALPHA LLC

**Current Principal Place of Business:**

400 NORTH PINE ISLAND ROAD  
SUITE 300  
PLANTATION, FL 33324

**Current Mailing Address:**

400 NORTH PINE ISLAND ROAD  
SUITE 300  
PLANTATION, FL 33324

**FEI Number:** 83-0470212

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** NRAI SERVICES, INC.

04/20/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SCHECK, JEFFREY  
Address 400 NORTH PINE ISLAND ROAD, STE 300  
City-State-Zip: PLANTATION FL 33324

Title MGR  
Name SCHECK, MARTIN  
Address 400 NORTH PINE ISLAND ROAD, STE 300  
City-State-Zip: PLANTATION FL 33324

Title MGR  
Name SCHECK, STEVEN  
Address 400 NORTH PINE ISLAND ROAD, STE 300  
City-State-Zip: PLANTATION FL 33324

Title MGR  
Name BONWITT, GIL  
Address 400 NORTH PINE ISLAND ROAD, STE 300  
City-State-Zip: PLANTATION FL 33324

*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:** JEFFREY SCHECK

**MANAGER**

04/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date