

MAR. 7. 2012 10:20  
Division of Corporations

LO9000121861

1 of 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H12000060507 3)))



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MAR -8 2012

L. SELLERS

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : TRENAM KEMKER ST. PETE  
Account Number : I20060000029  
Phone : (727) 896-7171  
Fax Number : (727) 820-0835

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: ALI@ACASPRMO.COM

RECEIVED  
12 MAR -7 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
AC ADVERTISING SPECIALTIES LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

FILED  
12 MAR -7 AM 10:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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MAR. 7. 2012 10:20AM

NO. 3011 P. 2

(((H12000060507 3)))  
**COVER LETTER**

**TO: Registration Section**  
**Division of Corporations**

**SUBJECT: AC Advertising Specialties, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Derek R. Houston

Name of Person

Trenam Kemker

Firm/Company

200 Central Avenue, Suite 1600

Address

St. Petersburg, FL 33701

City/State and Zip Code

all@acaspromo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori L. Ammons

Name of Person

at ( 727 )

824-6205

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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(((H12000060507 3)))  
**ARTICLES OF AMENDMENT  
 TO  
 ARTICLES OF ORGANIZATION  
 OF**

**AC Advertising Specialties, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
 (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on December 23, 2009 and assigned  
 Florida document number L09000121861.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Ali Specialties, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

12 MAR - 7 AM  
 SECRETARY OF  
 STATE  
 ALL CHANGES  
 MUST BE  
 FILED

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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, F.S. ~~Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.~~

If Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated March 6, 2012

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Derek R. Houston  
\_\_\_\_\_  
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00  
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