

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000032732

Entity Name: ALLVIEW SECURITY, LLC

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

9351 SW 109 TERR.  
MIAMI, FL 33176

## **New Principal Place of Business:**

## **Current Mailing Address:**

55 MIRACLE MILE, STE. 200  
CORAL GABLES, FL 33134

## **New Mailing Address:**

3250 MARY STREET  
SUITE 307  
COCONUT GROVE, FL 33133

FEI Number: 33-1135553

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DOWNS, CRAIG T  
55 MIRACLE MILE, STE. 200  
CORAL GABLES, FL 33134 US

## **Name and Address of New Registered Agent:**

DOWNS, CRAIG T  
3250 MARY STREET, STE. 307  
COCONUT GROVE, FL 33133 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: CRAIG T. DOWNS

04/25/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DOWNS, CRAIG T  
Address: 9351 SW 109 TERR., STE. 200  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: GILLIS, KEVIN  
Address: 13893 S.W. 102ND LANE, #3186  
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: CRAIG T. DOWNS

MGR

04/25/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date