

**L12000001221**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : HISPANUSA INC  
Account Number : I20070000099  
Phone : (954) 478-2706  
Fax Number : (954) 934-0334

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ALLEN SIGNS LLC

Certificate of Status	0
Certified Copy	0
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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B. BOSTICK

JAN 12 2012

EXAMINER

1/11/2012 12:05 PM

Jan. 11. 2012 1:19PM INSIGHT CABLE

No. 7255 P. 2/4

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ALLEN SIGNS 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:

**ALFONSO EDUARDO CORIA**

Name of Person

**ALLEN SIGNS LLC**

Firm/Company

**2250 NW 72ND AVENUE**

Address

**SUNRISE, FL 33313**

City/State and Zip Code

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

For further information concerning this matter, please call:

**ALFONSO EDUARDO CORIA**

Name of Person

at ( **754** )

**246-0571**

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

SECRET  
TALLAHASSEE, FLORIDA

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Jan. 11. 2012 1:19PM

INSIGHT CABLE

No. 7255 P. 3/4

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**ALLEN SIGNS 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 JANUARY 04, 2012 and assigned  
Florida document number L12000001221

This amendment is submitted to amend the following:

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

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

**Enter new principal offices address, if applicable:**

2350 NW 72ND AVENUE APT 105A

**(Principal office address MUST BE A STREET ADDRESS)**

SUNRISE, FL. 33313

**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*

*Zip Code*

**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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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


Dated JANUARY 11, 2012

12 JAN 11 AM 8:57  
ALL HASSEE FLORIDA

P/Alfonso E. Coria

Signature of a member or authorized representative of a member

ALFONSO EDUARDO CORIA

Typed or printed name of signee