

2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000092391

Entity Name: QUINTON LLC**Current Principal Place of Business:**1551 NORTH FLAGLER DR
UNIT 1516
WEST PALM BEACH, FL 33401**Current Mailing Address:**PO BOX 860
LOXAHATCHEE , FL 33470 US**FEI Number:** 45-2981957**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES, DAN J
4588 SAN FRATELLO CIRCLE
LAKE WORTH, FL 33467 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:** DAN J JONES

04/12/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CFO, 33% CERTIFICATE OF STOCK
Name JONES, DANNY J TRUSTEE
Address 1551 NORTH FLAGLER DRIVE
1516
City-State-Zip: WEST PALM BEACH FL 33401

Title CEO, & TRUST TRUSTEE 33%
CERTIFICATE HOLDER
Name JONES, DANNY J OWNER
Address 1551 NORTH FLAGLER DRIVE
UNIT 1516
City-State-Zip: WEST PAL BEACH FL 33401

Title CO-TRUSTEE, 34% CERTIFICATE OF
STOCK HOLDER
Name VANNOSTRAND, NICOLLE OWNER
Address 1551 NORTH FLAGLER DRIVE
UNIT 1516
City-State-Zip: WEST PALM BEACH FL 33401

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: DANNY J JONESTRUSTEE, C.F. FOUNDER 04/12/2019
OF QUINTON LLC

Electronic Signature of Signing Authorized Person(s) Detail

Date