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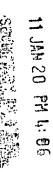
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COVER LETTER

TO:	Amendment Division o	nt Section f Corporations					
SUBJ	ЕСТ:	NANOTECHN	OVATION CONTRACTOR Name of Corpor	ORPORATION ation			
DOCU	JMENT NU	MBER:	F090000	002867			
The er	closed State	ment of Change of Reg	istered Office/Age	nt and fee are submitted for filing.			
Please	return all co	rrespondence concernit	ng this matter to th	e following:			
			DONALD SAI				
			Name of Contact	Person			
NANOTECHNOVATION CORPORATION							
			Firm/Compar	ny .			
	2811 NE 14TH ST						
			Address				
OCALA, FL 34470 City/State and Zip Code							
		B.4\A/1	EST@CLAIRS(
	_			annual report notification)			
For fu	ther informa	ntion concerning this ma	atter, please call:	,			
		ONALD SAUEY	at (352 732-3244 Area Code & Daytime Telephone Number			
	Nar	me of Contact Person		Area Code & Daytime Telephone Number			
Enclos	ed is a \$35.0	00 check made payable	to the Department	of State.			
		Mailing Address: Amendment Sect Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a co	orporation organize	607.1508, or 617.1508, Flo ed under the laws of the Sta ed agent, or both, in the Sta	te of FLORIDA		
1. The name of	the corporation: NANC	<u>OTECHNOVA</u>	ATION CORPORAT	TION		
2. The principa OCALA F	l office address <u>:</u> 2811 N L 24470		* * * * * * * * * * * * * * * * * * *	· · · · · · · · · · · · · · · · · · ·		
3. The mailing						
4. Date of incom	rporation/qualification:	7/17/2009	Document number:	F09000002867		
	d street address of the cur artment of State: (If resign		nt and registered office on f	ile with the		
	WAYNE KRAUSE					
11590 SW 50TH CIRCLE						
	OCALA, FL 34476	3		JAN 20		
6. The name an (if changed):		w registered agent ((if changed) and /or register			
	DONALD SAUEY					
	2811 NE 14TH ST	P.O. Box NOT a				
	OCALA FL 34470	P.O. BOX NOT a	ссераые			
The street addr	ess of its registered offic l be identical.	e and the street ad	ldress of the business offic	e of its registered agent,		
Such change wanthorized by t	as authorized by resolution the board, or the corporation	ion duly adopted b tion has been notif	by its board of directors or fied in writing of the chang	by an officer so se.		
-	ure of an officer or director	<u> </u>	DONALD SAUEY	e and title		
I hereby accept I further agree of my duties, at document is be corporation ha	t the appointment as reg to comply with the provi nd I am familiar with and ing filed merely to reflec s been notified in writing	istered agent and a isions of all statute d accept the obliga t a change in the i g of this change.	agree to act in this capacit es relative to the proper an ation of my position as reg registered office address, I	y, id complete performance istered agent. Or, if this hereby confirm that the		
Ma	es Dave	. .	11/29/10			
If signing on be	gnature of Registered Agent ehalf of an entity:	5	Date			
	OONALD SAUEY Typed or Printed Name					

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *