5000022161

(Requestor's Name)	
(Address)	
(Address)	
(C)	
(City/State/Zip/Phone #)	
PICK-UP WAIT N	/AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	1
A. LUNT	•
FEB 28 2011	!
EXAMINIC	ם כו

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COVER LETTER

TO:	Registration S Division of Co	Section Prporations					
SUBJE	CT: _	Canton T	echnologies LLC				
· ;; ·		· Name of Lim	ited Liability Company				
The end	closed Articles of	f Amendment and fee(s) are su	bmitted for filing.	,		•	
Please	return all corresp	ondence concerning this matte	r to the following:				
			Ana D Quinzi				
			Name of Person				
		Са	inton Technologies LLC				
			Firm/Company		•		
			2950 Saber Drive		Eco	201	
			Address			2012 FEB	بند
		(Clearwater, FL 33759		F.S.S.	\sim	
	City/State and Zip Code				7	7	
		ad	esmond@sprynet.com		STA	₩	
		E-mail address: (to be used for future annual report notific	ation)	프중	QUI CAD	1
For furt	her information of	concerning this matter, please of	call:		134	49	
	N	Mark Quinzi	at (727) 4	66-6068			
	Name o	of Person	Area Code & Daytime	Telephone Number	<u></u>		
Enclose	d is a check for t	the following amount:					
\$2 5.	00 Filing Fee	▼\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status		d)
		ING ADDRESS: ration Section	STREET/COURIE	R ADDRESS:			
	Divisio	on of Corporations Ox 6327	Registration Section Division of Corporat Clifton Building	ions			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Canton Technologies LLC		
(Name of the Limit	ted Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited	Liability Company were filed on	March 04 2005	_ and assigned
Florida document number L050000	22161		
This amendment is submitted to amend the fo	ollowing:		
A. If amending name, enter the new name	of the limited liability company h	ere:	
The new name must be distinguishable and end "L.L.C."	with the words "Limited Liability Com	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if app	licable:		20
(Principal office address MUST BE A STR.	EET ADDRESS)		7
		HE AS	<u>B</u> 1
•		SE SE	7
Enter new mailing address, if applicable:		Pro-	
(Mailing address MAY BE A POST OFFIC	<u></u>	- C - C - C - C - C - C - C - C - C - C	<u> </u>
		₩.	dn
B. If amending the registered agent an registered agent and/or the new registered		our records, enter the	name of the nev
Name of New Registered Agent:			
New Registered Office Address:		 	
	H	Inter Florida street addre	SS
		, 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

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

	Manager = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Ana D Quinzi	2950 Saber Drive Clearwater, Florida 33759	Add Remove
MGRM	Mark Quinzi	2950 Saber Drive Clearwater, Florida 33759	Add Remove
			Add Remove
_		<i>></i> ω	Add Remove
		COANE ASSET	□Add PRemoye
		OF STATE	Add Remove
D. If an	Ana D Quiniz wishes to add Mari	hange(s) here: (Attach additional sheets, if necessary.) k Quinzi to Canton Technologies LLC.	_
		ay to day banking and financial duties. Managing Member so that the bank reconizes	_
		n to make changes to our business banking	-
	accounts as our business grows.	as I have no time for this responsibility.	_
Dated	February 22	2012 Jum	
	Signature of Ame	mber or authorized representative of a member Ana D Quinzi yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00