L09000112011

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					

Special Instructions to Filing Officer:

A. LUNT

SEP 1 3 2010

EXAMINER

Office Use Only



300180540793

05/14/10--01008--021 **35.00





July 22, 2010

LIZETH NIETO 10773 NW 58 ST #248 MIAMI, FL 33178

SUBJECT: LD TECHNOLOGY USA, LLC

Ref. Number: L09000112011

We have received your document for LD TECHNOLOGY USA, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 210A00017824

Agnes Lunt Regulatory Specialist II

www.sunbiz.org



May 19, 2010

LIZETH NIETO 10773 NW 58 ST #248 MIAMI, FL 33178

SUBJECT: LD TECHNOLOGY USA, LLC

Ref. Number: L09000112011

We have received your document for LD TECHNOLOGY USA, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 010A00012714

COVER'LETTER

TO: Registration Section Division of Corporations							
SUBJECT: LD TECH WOLOGY USA LLC Name of Limited Liability Company							
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:							
Lizeth Niet							
Name of Person							
LO TECHNOLOGY USE LLC. Firm/Company							
10773 NW 58 ST # Z48 Address							
Mi Arii Florida 33178 City/State and Zin Code							
Mi Arii Florida 33178 City/State and Zip Code Liznieto 2005 @Hot mail.com. E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Area Code & Daytime Telephone Number Area Code & Daytime Telephone Number							
Enclosed is a check for the following amount:							
\$25.00 Filing Fee \$ Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) (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

ARTICLES OF AMENDMENT TO . ARTICLES OF ORGANIZATION OF

LD TECHNOLOGO	,	LLC.			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now ar liability Compa	opears on our records.) iny)		_	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 09000 (1201)</u>	were filed on	11/20/2000	and	assigne	·d
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company	y here:			
LDN TECHNOLOGY USA	LLC.				
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability C	ompany," the designation	"LLyg",grt	:h ere bbre	viation
Enter new principal offices address, if applicable:	- P/	A	AHA	SEP	B
(Principal office address MUST BE A STREET ADDRESS)			SSA	<u> </u>	二
	 			<u> </u>	
Enter new mailing address, if applicable:	N/A		S NA	డ్లు — —	ري
(Mailing address MAY BE A POST OFFICE BOX)			Mari ^a		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:		on our records, enter	the nam	ie of th	<u>e new</u>
		Enter Florida street ad	ddress		
- declinate of the second	 	, Florida			
	City		Zip C	2ode	

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma $MGRM = N$	nager Ianaging Member		
Title	Name	<u>Address</u>	Type of Action
			Add Remove
			1 T
			Add Remove
			AFF SEP OVE
			Add Add
D. If amen	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if neces	sary.)
			
Dated	tize	th wielo	
	Signature of a member	er or authorized representative of a member	
	Туре	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00