

**L12000104436**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2012 DEC 11 AM 10:28

**C. LEWIS**  
*Dec 12, 2012*  
**EXAMINER**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 16, 2012

SEAN KELLY / GTECHNIQ FLORIDA LLC  
802 OLD DIXIE HWY #6  
LAKE PARK, FL 33403

SUBJECT: GTECHNIQ FLORIDA LLC  
Ref. Number: L12000104436

We have received your document for GTECHNIQ FLORIDA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of 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) 245-6051.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 212A00027717

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GTECHNIQ Florida 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:

SEAN Kelly

Name of Person

GTECHNIQ Florida LLC

Firm/Company

802 Old Dixie Hwy #6

Address

Lake Park FL 33403

City/State and Zip Code

SKelly@GTECHNIQFL.COM

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

For further information concerning this matter, please call:

SEAN Kelly

Name of Person

at (561) 328-7302

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

GTECHNIQ Florida LLC

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2012 DEC 11 AM 10:28

(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 Sept 17, 2012 and assigned  
Florida document number 412000104436

This amendment is submitted to amend the following:

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

NANOTECHNIQ LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

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

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

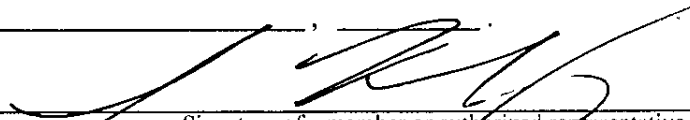
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	Norman Thomas	716 Nighthawk Way	<input checked="" type="checkbox"/> Add
		NPB Fl 33408	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2012 DEC 11 AM 10:28

Dated \_\_\_\_\_

X



Signature of a member or authorized representative of a member

X

SEAN KELLY

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

L12000104436