Division of Corpo	orations Source 201878047514:2322 3150 Florida Department of State Division of Corporations Electronic Filing Cover Sheet	<b>D</b> Page 1 of 2
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Li	To: Division of Corporations Fax Number : (850)617-6383	
	From: The Chief Account Name : AKERMAN LLP - TAMPA Account Number : I2000000249 Phone : (813)223-7333 Fax Number : (813)223-2837	TILED
**Enter t ann	the email address for this business entity to be unual report mailings. Enter only one email address	used for future
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Canton Elements LLC	C ne of the Limited Linbilly Comnar (A Florida Limited L	y as it pow appen	ra on our f	cords.)		
The Articles of Organization for th Florida document number L15000 This amendment is submitted to an	115024	were filed on <u>J</u>	ly 8, 2015		and assigned	sd
A. If amending name, <u>enter the</u> The new name must be distinguishable ar				"LLC" or the ab	breviation "L.L.C.	, 1)
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Enter new principal offices addr	ess, if applicable:					
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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 605, 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

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# If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

#### MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Robert V. Canton	401 E. Jackson Street, Suite 2525	🗅 Add
		Tampa, FL 33602	E Remove
			Change
MGR	Deborah A. Canton	401 E. Jackson Street, Suite 2525	🖬 Add
		Tampa, FL 33602	D Remove
			Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effect	ive date. if other th	an the date of filing:			(optional)	
Note:	If the date inserted in	date must be specific and on this block does not mee n the Department of Stat	t the applicable sta	f filing or more than tutory filing require	<u>(optional)</u> 90 days after filing.) Pursuant ements, this date will not l	to 605.0207 (3)(b) be listed as the
If the real (b) The	cord specifies a d 90th day after th	elayed effective dat ne record is filed.	e, but not an e	ffective time, a	t 12:01 a.m, on the	earlier of:
	October 15		2015	_		

Dated October15, 2015 For Canton

Signature of a member or authorized representative of a member

Robert V. Canton

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Typed or printed name of signee

#### Page 3 of 3

### Filing Fee: \$25.00

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