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COVER LETTER

Division of Corp				
QUANTUM SUBJECT:	HT LLC			
SUBJECT:	Name of Lim	ited Liability Company	<u></u>	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspor	ndence concerning this matter	to the following:		
	LEONARD GUERRA			
		Name of Person		
	QUANTUM IT LLC			
	4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Address		
	LAKEWOOÐ RANCH, F	L. 34202-5137		
		City/State and Zip Code	<u> </u>	
	Iguerra@itnetix.net		같은 일	
For further information co	E-mail address: () incerning this matter, please ca	to be used for future annual report notifica all:		FI
Leonard Guerra		813 699-9536 at ()	SSESS -	FM
Name of Enclosed is a check for the		Area Code Daytime To	clephone Number FL 0710 A 9 55	O
S25.00 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

(Name of the Limited L. (A F	iability Compar lorida Limited L	ny as it now appears on lability Company)	our records.)						
The Articles of Organization for this Limited Liability Company were filed on MARCH 09, 2016 Florida document number 1.16000048602						and assigned			
his amendment is submitted to amend the following	าg:								
a. If amending name, enter the new name of the	limited liabi	lity company here:							
T NETIX LLC									
he new name must be distinguishable and contain the words	"Limited Liabili	ty Company," the desig	nation "LLC" or t	he abbrev	iation "L	LC."			
Inter new principal offices address, if applicable	:	8374 MARKET STREET # 134							
Principal office address MUST BE A STREET A		LAKEWOOD RANCH, FL. 34202-5137							
Inter new mailing address, if applicable:		8374 MARKET ST	REET # 134	TALLAHA	2017 JUL	η			
Mailing address MAY BE A POST OFFICE BOX)		LAKEWOOD RAN	NCH, FL. 34202	-567	ا ا				
3. If amending the registered agent and/or registered agent and/or the new registered office			ır records, <u>er</u>	COR the	₽ pane Oi	of the			
Name of New Registered Agent:									
New Registered Office Address:	374 MARKET	STREET # 134							
I	Emer Florida street address LAKEWOOD RANCH								
<u> </u>		Cuy	, Florida	a	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 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

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>	<u>Name</u>	Address	Type of Action
AMBR	LEONARD GUERRA	938 BENNINGER DRIVE	
		BRANDON, FL. 33510 US	Remove
			☐ Change
AMBR	LEONARD GUERRA	8374 MARKET STREET #134	
		LAKEWOOD RANCH, FL. 34202	□ Remove
			☐ Change
			
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ctive date, if other than t	he date of fi	8/1/2 ling:	:017			(on	tional)		
effective date is listed, the date r	nust be specific	and cannot l	pe prior to da	te of filing o	r more than	90 days aft	er filing.) Pursuar	it to 605.0
: If the date inserted in this ment's effective date on the				statutory t	iling requir	ements, ti	us date	will not	be listed
	·								
ecord specifies a delay			ut not ar	effectiv	e time, a	t 12:01	a.m.	on the	earlier
e 90th day after the r	ecord is file	ed.							
6/30		2017							
d	~ 	_,	 ·						
		,	nd Du						

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Filing Fee: \$25.00

Typed or printed name of signee