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(Requestor's Name) (Address) (Address)	500323765555
(City/State/Zip/Phone #)	01/28/1901003016 **25.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	2019 ILS 18 P 1 18
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## **COVER LETTER**

TO: Registration Section Division of Corporations

LENNTECH USA LLC
SUBJECT:

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:

**GIANNI TONIUTTI** 

Name of Person

TOSOLINI & LAMURA LLP

Firm/Company

407 LINCOLN ROAD SUITE 11C

Address

MIAMI BEACH, FLORIDA 33139

City/State and Zip Code

gianni.toniutti@tlrtlaw.com

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

305 at (

Area Code

For further information concerning this matter, please call:

GIANNI TONIUTTI

Name of Person

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:

Daytime Telephone Number

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

534-0420



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 5, 2019

GIANNI TONIUTTI 407 LINCOLN RD STE 11C MIAMI BEACH, FL 33139

SUBJECT: LENNTECH USA LLC Ref. Number: L19000005010

We have received your document for LENNTECH USA 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):

Please have Gianni Toniutii sign the document.

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) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 619A00002531

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www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 323 14

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

0	F	F/11 (Par)
LENNTECH USA LLC		· · · · · · · · · · · · · · · · · · ·
( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	<u>ny as it now appears on ou</u> Jability Company)	18 12 P 1: 18
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000005010</u>	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designati	on "LLC" or the abbreviation "L.L.C."
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)	<u> </u>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		records, <u>enter the name of the ne</u>
Name of New Registered Agent:		

or new registered Agent: New Registered Office Address: Enter Florida street address \_, Florida \_ Zip Code City

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, <u>enter the title, name, and address of each person being a</u><u>or removed from our records</u>:

## MGR = Manager AMBR = Authorized Member

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Title	Name	Address	Type of Action
MGR	JONKHEER, DAVID E	407 LINCOLN ROAD. SUITE	Add
		MIAMI BEACH, FL 33139	🖬 Remove
			Change
MGR	VAN LENNEP, DAVID EMILE	407 LINCOLN ROAD, SUITE 11C	🖬 Add
		MIAMI BEACH, FL 33139	Remove
			Change
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			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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	<u> </u>
E. Effec	tive date, if other than the date of filing: (optional) freetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b
Note	1 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
	ment's effective date on the Department of State's records.
75 <b>4</b> 10	and apprifice a delayed offertive data, but not as offertive time, at 10,01 p as on the series of
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed. $\Lambda$
(0) ///	
	, JANUARY 21 2019
Date	3
	A diffe
	Signature of a member or authorized Enreventative of a member
	$\smile$
	GIANNI TONIUTTI

Filing Fee: \$25.00