F07000005318

(Requestor's Name)	
(Address)	300108911223
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	10/29/0701002002 **70.00
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	07 OCT 26 PM 3: 03 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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GLAZIER & GLAZIER, P.A.

ATTORNEYS AT LAW

SCOTT L. GLAZIER CYNTHIA B. GLAZIER J. COREY SILVERMAN KATHRYN A. WILTSE* *O7 COUNSE!

October 25, 2007

VIA UPS OVERNIGHT

Ms. Ruby Dunlap
Division of Corporations
New Filing Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32314

Re:

Votorantim Cimentos North America, Inc.

Dear Ms. Dunlap:

Per our telephone conversation on October 25, 2007, please find enclosed the following two (2) documents for filing with the Florida Department of State relating to the above-referenced corporation:

- (1) Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida (the "Withdrawal Application"); and
- (2) Application by Foreign Corporation for Authorization to Transact Business in Florida (the "Authorization Application").

Please file the Withdrawal Application first with the Amendment Section of the Division of Corporations; then please file the Authorization Application with the New Filing Section of the Division of Corporations. We have also enclosed two (2) separate checks: (1) one in the amount of \$35.00 for the filing of the Withdrawal Application; and (2) one in the amount of \$70.00 for the filing of the Authorization Application.

If you have any questions, please feel free to contact me at (904) 977-1033. Thank you for your assistance.

Very truly yours,

Corey Silverman

JCS/pp Encl.

 $S:\Documents\Scott\VCNA\Div\ of\ Corp\ ltr\ -\ with drawal. doc$

8825 Perimeter Park Boulevard, Suite 504
Jacksonville, Florida 32216
Phone (904) 997-1033 • Facsimile (904) 997-1733

COVER LETTER

	Filing Section sion of Corporations			
SUBJECT	Votorantim Cimento	os North	n America, Inc.	
0020201			on - must include suffix	x)
Dear Sir or I	Madam:			
"Certificate	d "Application by Foreign Corp of Existence," and check are sul ness in Florida.			
Please return	all correspondence concerning	this matte	r to the following:	
Scott L.	Glazier, Esquire			
		(Name o	f Person)	
Glazier 8	& Glazier, P.A.			
		(Firm/Co	ompany)	
8825 Pe	rimeter Park Blvd., Si	uite 504		
		(Add	ress)	
Jackson	ville, Florida 32216			750
	(City/State	and Zip code)	EG B
For further in	nformation concerning this matt	ter, please o	call:	T 26 P
Daniel Fi	ritz at	, 904	361-7711	PH 3:
(Na	me of Person)	<u> </u>	Code & Daytime Telep	hone Number) RIGH
New Divi Clift 2661	EET/COURIER ADDRESS: Filing Section sion of Corporations on Building Executive Center Circle ahassee, FL 32301		MAILING New Filing S Division of O P.O. Box 63 Tallahassee,	Section Corporations 27
Enclosed is a	check for the following amoun	nt:		
\$70.00 Fil	ing Fee \$78.75 Filing Fe Certificate of S		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of c	m Cimentos North America, corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")				
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting bus	ness in Florida)		
Delaware	Delaware 3, 20-0428106				
·	under the law of which it is incorporated)	(FEI number, if applicable)			
Novembe	r 26, 2003	Perpetual			
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")			
February	7, 2007				
-		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)			
_{7.} 100 West	Bay Street, Suite 700, Jacks	sonville, Florida 32202			
	(Principal office ad	dress)			
100 West	Bay Street, Suite 700, Jacks	sonville, Florida 32202			
	(Current mailing ad	ldress)			
Any lawfu	l business s) of corporation authorized in home state or o	CEL : J			
(Furpose(s	s) of corporation authorized in nome state or t	country to be carried out in state of Florida)	O7 SE		
. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	TO BO		
Name:	Glazier & Glazier, P.A.		形 72		
Office Address:	8825 Perimeter Park Blvd.	, Suite 504	SEE.		
	Jacksonville	Florida 32216	PM 3: 03 COF STATE EE, FLORID		
	(City)	, Florida 32216 (Zip code)	25 C3		
Having been nam designated in this further agree to c	gent's acceptance: ned as registered agent and to accept serve application, I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my p	tment as registered agent and agree to a relative to the proper and complete perj	oration at the place ct in this capacity.		

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Erik Madsen Address: 100 West Bay Street, Suite 700, Jacksonville, Florida 32202 Vice Chairman: NA Director: Daniel Fritz Address: 100 West Bay Street, Suite 700, Jacksonville, Florida 32202 Director: Felipe Lima Address: 100 West Bay Street, Suite 700, Jacksonville, Florida 32202 **B. OFFICERS** President: Erik Madsen Address: 100 West Bay Street, Suite 700, Jacksonville, Florida 32202 Vice President: Daniel Fritz Address: 100 West Bay Street, Suite 700, Jacksonville, Florida 32202 Secretary: Jolanta Malicki Address: 100 West Bay Street, Suite 700, Jacksonville, Florida 32202 Treasurer: Please see addendum for additional. Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

(Signature of Director or Officer listed in number 12 of the application)

Daviel R. Fritz, Chief Operation Officer
(Typed or printed name and capacity of person signing application)

Addendum to Application By Foreign Corporation for Authorization to Transact Business in Florida

12. Names and business addresses of officers and/or directors:

(continued)

B. OFFICERS

Chief Operating Officer:

Daniel Fritz

Address:

100 W. Bay Street, Suite 700

Jacksonville, Florida 32202

Chief Financial Officer:

Felipe Lima

Address:

100 W. Bay Street, Suite 700

Jacksonville, Florida 32202

Assistant Secretary:

Herold Deason

Address:

100 W. Bay Street, Suite 700

Jacksonville, Florida 32202

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VOTORANTIM CIMENTOS NORTH AMERICA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF SEPTEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VOTORANTIM CIMENTOS NORTH AMERICA, INC." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF NOVEMBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

O7 OCT 26 PH 3: 03
SECRETARISEE, FLORIDA



Darriet Smith Windson

AUTHENTICATION: 5993865

DATE: 09-12-07

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