117000131401

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

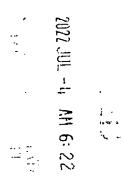
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FLORIDA DEPARTMENT OF STATE... Division of Corporations

May 20, 2021

ROGERIO FILHO 9870 NW 117 WAY MEDLEY, FL 33178

SUBJECT: USTONE CEMENT PRODUCTS & SOLUTION LLC

Ref. Number: L17000131401

We have received your document for USTONE CEMENT PRODUCTS & SOLUTION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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.

Letter Number: 521A00010676

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

	COVER LETTER					
	stration Section sion of Corporation	s				
SUBJECT:	USTONE	CEMENT PE	obuers 3 4	SOLUTION LLE		
Dear Sir or M	4adam:					
The enclosed	Registered Agent/	Registered Office Chan	ge and fee(s) are subm	itted for filing.		
Please return	all correspondence	concerning this matter	to the following:			
R		IEIRA FILI	40			
UGTOUP		RODUETS & SEL	ortina) LLe			
<u> </u>	Firm/Co		<u> </u>			
98	Addro	way ss				
ME	City/State a	3317 夕 nd Zip Code				
Rvi E-mail	EIRA EIRA	パヤロンピ・企画 I for future annual repo	rt notification)			
For further in	nformation concerni	ng this matter, please c	all:			
R061	Name of Person	A FILHO at (_		9950 Daytime Telephone Number		
Regi Divi P.O.	ling Address: istration Section sion of Corporatio Box 6327 ahassee, FL 32314		The Centre	n Section Corporations of Tallahassee onroe Street, Suite 810		
Encl	osed is a check for	the following amount	:			
© \$2	25 Filing Fee		S55 Filing Fee &	Certified Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company:	GTONE CE	MENT P	RO DUETS	150WT	1001 LLC	
	9870 NW 117 WAY MEDLEY, PL 33178 (b)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
3.	05/28/2021 Date of filing/registration in Flor	rida 4.		000 13 14 0 ocument number	-		
5. (a)	Registered Office Address (MUST BE FLORI	the records of the Florida WE DA STREET ADDRESS	ù	Ž.	2022 JUL -4		
(b)	SUITE 650 /K MIAMI ROBERIO VIETRA FI Enter name of NEW Registered Agent and/or NE	LH0	134	·	AN 6: 22	to	
	9870 UW 117 WAY NEW Registered Office Address:						
	HEDLEY	,FL_33.	78				
change agent v was/we	mited liability company is not organized or changes are made, the Florida street advill be identical. Or, in the case of a Florida et authorized by an affirmative vote of the cles of organization or the operating agree	Idress of the registere da limited liability co e members of the lim ement of the limited l	ed office and tompany, it is holity is holity company, it is holity company.	he business offic ereby confirmed company or as ot any.	the of the regis that the chan herwise provi	tered ge(s) ded in	
_/	ure of a member or authorized representative of a n	<u></u>	50 FR10	VIEIRA	FILHO/	MANAGER	
I herel provisi the obl. to merc notifice	we of a member of authorized representative of a new accept the appointment as registered agons of all statutes relative to the proper an igations of my position as registered agent by reflect a change in the registered office I in writing of this change. The of Registered Agent	rent and asree to act	in this capaci	rinted or typed name ity. I further agr ites. and I am far i.S. Or, if this de Imited liability	ee to comply	with the d accept ing filed · been	