

h22 000077249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

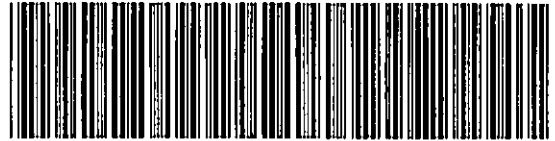
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

623,707

Office Use Only

*[Signature]*



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2012-11-24 10:00

22 NOV -8 PM 4:50  
DIVISION OF CORPORATION

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: STONE US GROUP LLC

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:

Paulo Factor

Name of Person

Safety Tax & Bookkeeping

Firm/Company

4307 vineland Rd Suite H7

Address

Orlando, FL 32811

City/State and Zip Code

safety@safetytax.com

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

For further information concerning this matter, please call:

Paulo Factor

407 888 4747  
at ( )

Name of Person

Area Code

Daytime Telephone Number

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

22 NOV -8 PM 4:50

STATE OF FLORIDA  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 28, 2022

PAULO FACTOR  
4307 VINELAND RD  
SUITE H7  
ORLANDO, FL 32811

SUBJECT: STONE US GROUP LLC  
Ref. Number: L22000077249

22 NOV -8 PM 4:50

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

We have received your document for STONE US GROUP 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):

We are enclosing the proper form(s) with instructions for your convenience.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Michael A Hall  
OPS Clerk

Letter Number: 922A00024252

NOV 08 2022

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

STONE US GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/16/2022 and assigned  
Florida document number L22000077249.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

4307 Vineland Rd, Suite H7

Orlando, FL 32811

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

4307 Vineland Rd, Suite H7

Orlando, FL 32811

RECEIVED  
DIVISION OF CORPORATE REGISTRATION  
22 NOV - 8 PM 4:50

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

SAFETY TAX & BOOKKEEPING

New Registered Office Address:

4307 Vineland Rd, Suite H7

*Enter Florida street address*

Orlando

*City*

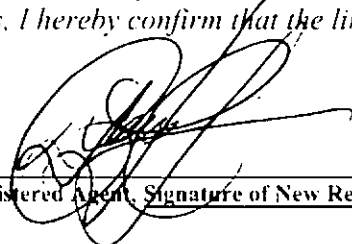
Florida 32811

*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



## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: STONE US GROUP LLC  
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:

\_\_\_\_\_  
Name of Person

SAFETY TAX & BOOKKEEPING  
Firm/Company

4307 VINELAND RD, STE H7  
Address

ORLANDO, FL, 32811  
City/State and Zip Code

SAFETY@SAFETYTAX.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAULO FACTOR at (407) 888-4747  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

22 NOV - 8 PM 4:50

RECEIVED  
TALLAHASSEE  
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

STONE US GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/04/2022 and signed 22 NOV - 8 PM 4:50  
Florida document number L 22 0000 77249

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

4307 VINELAND RD STE H7  
ORLANDO, FL 32811

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

4307 VINELAND RD STE H7  
ORLANDO, FL 32811

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

SAFETY TAX & BOOKKEEPING

New Registered Office Address:

4307 VINELAND RD STE H7

*Enter Florida street address*

ORLANDO

*City*

Florida

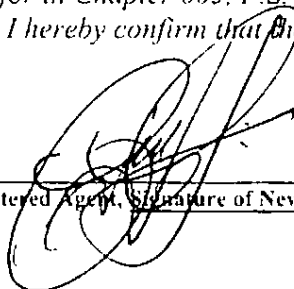
32811

*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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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22 NOV -8 PM 4:50  
DIVISION OF CORPORATION

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

*(This area is for amendments to the information provided in the preceding sections. Attach additional sheets, if necessary.)*

22 NOV - 8 PM 4:50  
DIVISION OF CORPORATIONS

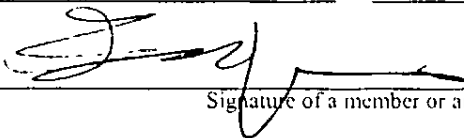
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective 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:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

VANUE ANTONIO DA SILVA FARIA

Typed or printed name of signee