## ·· M0600000002465

(Re	questor's Name)				
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(Document Number)					
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C. LEWIS

JUN 5 2014

EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2014

BILLY OYLER / NATURAL STONE DISTRIBUTORS LLC 8014 CLUB CENTER DR SUITE 11 CORDOVA, TN 38016 US

SUBJECT: NATURAL STONE DISTRIBUTORS, LLC

Ref. Number: M06000002465

We have received your document for NATURAL STONE DISTRIBUTORS, 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):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

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

Letter Number: 514A00009516

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org



COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
BFUY OVER Name of Person
NATUTES STONE DET. LLC Firm/Company
8014 CLUB CENTER DR., SATE 11 Address
CORDOVA TW. 360/8 City/State and Zip Code
DOVE ONSTONE, COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:    Span   VER   at (PV)   TIT-7255     Name of Person   Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Clifton Executive Center Circle Tallahassee, Florida 32301  For North Executive Center Circle Tallahassee, Florida 32301
Enclosed is a check for the following amount:

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

□ \$25 Filing Fee

## 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.

riorial	" w/n	1	$\overline{}$		,		
I. Na	me of the limited liability company:	TONE	J.BJX	-TONO!	<u>5, L</u>	1C	<u>-</u>
2. (a)	Principal office address of limited liability company:		Mailing address o	S ES	Ility compa	Dr. ny:	_
	(Note: MUST BE STREET ADDRESS)		(Note: MAY B				
		SU	FIE 11				
	PLANTATION, FL. 33324	COR	DOVA, 7	W, 3	3801	18	_
	5/2/2006	M OR	60000	0246	5		
3.	Date of filing/registration in Florida 4.	<u> </u>	Document nu	ımber			
5. (a)	CT POEROTE ATTOM SYSTEM	1					
J. (u)	Registered Agent and Registered Office shown on the records of the Florida	Dept. of Stat	e:				
	1200 SOUTH PIPE ISLAND TO						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS	2	_				
	PIANTATADO EL 3	3325	-				
						4	
(b)	LAUD L. CAVPEVEE					MAY	
	Enter name of NEW Registered Agent and/or NEW Registered Office ade	iress:	_		25年 25年	22	
	4054 INDOW TRAK					-0 	1
	NEW Registered Office Address:		_		<u> </u>	42	
						വ വ	
	$\sim$		•		•		
	DESTAV ,FL 32	54/	_				
If the li	mited liability company is not organized under the laws of the	State of FI	orida it is bere	ehy confirm	ned that s	fter	
the cha	nge or changes are made, the Florida street address of the regis	tered offic	e and the busing	ness office of	of the res	isterco	i
agent v	vill be identical. Or, in the case of a Florida limited liability corre authorized by ap-affirmative vote of the members of the lim	mpany, it i	is hereby confi	rmed that the	ne chang	e(s)	
the arti	cles of organization or the operating agreement of the limited 1	iability cor	npany.	do Offici Wis	c provid	cu m	
-(-		1)	LAWIR	NSPE	<b>江</b> 葵		
Signat	ure of a member or authorized representative of a member		Printed or typed		ice		-
I herel provisi the obli to mere norfied	by accept the appointment as registered agent and agree to act ons of all statutes relative to the proper and complete perform igations of my position as registered agent as provided for in C ly reflect a change in the registered office address, I hereby co I in writing of this change.	in this cap ance of my Chapter 60. onfirm that	pacity. I furthe duties, and I a 5, F.S. Or, if to the limited lia	r agree to c un familiar his docume bility comp	omply w with and nt is beir any has	rith the l accep ig filea been	t I
Signatur	re of Registered Agent						