

M090000001425

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(Business Entity Name)

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2023 OCT 30 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2023 OCT 30 PM 3:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA


CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 098083 4700320

AUTHORIZATION :

COST LIMIT : \$ 25100



ORDER DATE : October 30, 2023

ORDER TIME : 12:02 PM

ORDER NO. : 098083-010

CUSTOMER NO: 4700320

FOREIGN FILINGS

NAME: LHOIST NORTH AMERICA OF
ALABAMA, LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lhoist North America of Alabama, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rachel Galvan

Name of Person

Lhoist North America of Alabama, LLC

Firm/Company

5600 Clearfork Main Street, Suite 300

Address

Fort Worth, Texas 76109

City/State and Zip Code

rache.galvan@lhoist.com

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

For further information concerning this matter, please call:

Rachel Galvan at (817) 806-1613
Name of Person Area Code Daytime Telephone Number

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

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: Lhoist North America of Alabama, LLC

SECOND: The Florida Document number of the limited liability company is: M09000001425

THIRD: Document to be corrected is: Authorized Person(s) Correction of Spelling

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Please correct the spelling of the following name: Dr. Philipp Niemann,

more specifically the spelling of his first name. All other info is correct and shall remain


unchanged. Thank you.

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

- ☐ The electronic transmission of the record was defective.


Signature of Authorized Representative

Date

FILED
2023 OCT 30 AM 10:09
TALLAHASSEE, FLORIDA

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

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.

Registered Agent's Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)