## M14000005108

(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						
J. HORNE JUN 19 2024						

Office Use Only



900430639259

2021 JUL 18 AL 9: 57 224 JUL 18 PH 3: 23

CSC - Tallahassee **CSC** 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda Miller@cscglobal.com

Ext:

Date: 06/18/24

Order #: 1539285-2

Re: Stoneleaf Construction LLC Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.00 - FL State Account Number: I20000000195 while

**AUTH** 

Please take the following action:

File on a routine basis Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## 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. Name of the limited liability company:  STONELEAF CONSTRUCTION LLC						
2	(a)		Œ	)		
	(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (-		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		4974 ROUTE 22		4974 ROI	UTE 22	
		ARMENIA, NY 12501	_	ARMENIA	A, NY 12501	
		07/18/2014		M1400000	05108	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)					
	, ,	Registered Agent and Registered Office shown on the records of to	he Florida	Dept. of State	e:	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-		
		1201 HAYS STREET				
		TALLAHASSEE .FL	32301	_	-	
					TA.	
	(b)				- E - T	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	<u>dress</u> ;		
		Corporation Service Company				
		NEW Registered Office Address:			- 1,2 1 S	
		1201 Hays Street			MAJULIA EL SI SO	
		Tallahassee . FL	32301			
ch ag wa	ange ent w is/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registere bility co f the lim	d office and mpany, it is ited liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in	
/s/ Juan Torres				Juan Torres, Authorized Person		
Signature of a member or authorized representative of a member					Printed or typed name of signee	
pre the to	ovisie obli mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I h I'm writing of this change.	performa	ince of my a	luties, and I am familiar with and accept	
Signature of Registered Agent  Gross E. Viehe, Aget View President on babels of Company						
Grace E. Kirby. Asst. Vice President on behalf of Corporation Service Company Division of Corporations P.O. Box 6327 Tallahassee, FL 32314						

INH\$18 (2/14)

CSC COA-6324