

11500004405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

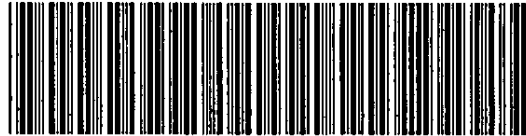
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/14/16--01007--005 *\$35.00

FILED

2016 MAR 23 P 5:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 24 2016
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 15, 2016

BERTHA VELEZ
15800 PINES BLVD, STE 300
PEMBROKE PINES, FL 33027

SUBJECT: STONE GROUP CONTRACTORS, LLC
Ref. Number: M15000001405

We have received your document for STONE GROUP CONTRACTORS, 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):

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

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 716A00005349

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SUBJECT:

Stone Group Contractors LLC

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:

Bertha Velez

Name of Person

Stone Group Contractors LLC

Firm/Company

15800 Pines Blvd STE 3071

Address

Pembroke Pines, Florida 33027

City/State and Zip Code

Stonegroup123@gmail.com

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

For further information concerning this matter, please call:

Bertha Velez

Name of Person

at (347) 946-7768

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

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TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

1. Name of the limited liability company: Stone Group Contractors LLC

2. (a) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

1770 Indian Trail Rd STE 4
Norcross, GA 30093

(b) _____

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

1770 Indian Trail Rd
STE 4 NORCROSS, GA 30093

3. 02/17/2015
Date of filing/registration in Florida

4. M1000001405
Document number

5. (a) Ileana Caudales
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1501 NE 7th Ave
Ft Lauderdale, FL 33304

(b) Bertha Velez
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

15800 Pines Blvd Suite 307H
Pembroke Pines, FL 33027

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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

BERTHA VELEZ
Printed or typed name of signer

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.

[Signature]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00