P96000076172

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(Cit	y/State/Zip/Phone	∍#)	
PICK-UP	☐ WAIT	MAIL	
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(Do	cument Number)		
Certified Copies Certificates of Status			
Special Instructions to	Eiling Officer	1	
Special instructions to	Filling Officer.		
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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

3/3/17

NAME:

DUROSTONE SOLID SURFACES, INC

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abbie Hadr

COVER LETTER

TO: Amen Divis	dment Section ion of Corporations	
SUBJECT:	DUROSTONE SOLID S	URFACES, INC.
SOBSECT	Name of Cor	poration
DOCUMENT	P96000076172	
The enclosed	Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return a	all correspondence concerning this matter t	o the following:
	Justin Maroldi	
	Name of Conta	ect Person
	Firm/Com	pany
	c/o Platinum Equity Advisors, 360 North C	rescent Drive, South Building
	Addres	S
	Beverly Hills, CA 90210	
	City/State and 2	Zip Code
	jmaroldi@platinumequity.com	
	E-mail address: (to be used for futu	re annual report notification)
For further info	rmation concerning this matter, please call	:
Justin Maroldi		310 228-9712
	Name of Contact Person	at () 228-9712 Area Code & Daytime Telephone Number
	35.00 check made payable to the Departme	
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

P.O. Box 6327

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		e or registered agent, or both, in the State of Florida.	
1. The name o	of the corporation: DUROSTON	E SOLID SURFACES, INC.	
2. The princip	al office address: 405 6th Street, H	HOLLY HILL, FL 32117	
3. The mailing	gaddress (if different):		
4. Date of inco	orporation/qualification: 09/12/19	P96 Document number: P96000076172	
	nd street address of the current re artment of State: (If resigned, ent	egistered agent and registered office on file with the ter resigned)	
	MAUGERI, RICHARD C		
	515 S RIDGEWOOD AVE	2	
	DAYTONA BEACH, FL 32114		= =
5. The name an (if changed):		tered agent (if changed) and /or registered office	FILED FILED PHIZ: 07
	C T Corporation System		12:
	c/o C T Corporation System, 120	0 South Pine Island Road	2
	P.C	D. Box NOT acceptable	
	Plantation, Florida 33324		
The street address changed will	ess of its registered office and the identical.	ne street address of the business office of its registered agen	ıt,
Such change was	as authorized by resolution duly he board, or the forporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	
1 mymoth		Vice President & Treasurer	
Signatu	1 1 1	Printed or typed name and title	
hereby accept further agree erformance of gent. Or, if th ereby confirm	the appointifient as registered a to komply with the provisions of my duties, and I am familiar will is document is being filed merel That the corporation has been i	ngent and agree to act in this capacity. I all statutes relative to the proper and complete th and accept the obligation of my position as registered by to reflect a change in the registered office address, I otified in writing of this change.	
	poration System	3/3/2017	
	nature of Registered Agent	Date	

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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