590 SW 12TH AVE POMPANO BEACH, FL 33069			
I OWITANO BEACH, TE 33003			
Current Mailing Address:			
590 SW 12TH AVE			
POMPANO BEACH, FL 33069 UN			
FEI Number: 47-1046789		Certificate of Status Desired: No	
Name and Address of Current Registered Agent:			
COSTA, ANNA K			
590 SW 12TH AVE			
POMPANO BEACH, FL 33069 US			
	its registered office or regis	tered agent, or both, in the State of Flo	orida.
POMPANO BEACH, FL 33069 US	its registered office or regis	tered agent, or both, in the State of Flo	
POMPANO BEACH, FL 33069 US The above named entity submits this statement for the purpose of changing	g its registered office or regis	tered agent, or both, in the State of Flo	
POMPANO BEACH, FL 33069 US The above named entity submits this statement for the purpose of changing SIGNATURE: ANNA COSTA Electronic Signature of Registered Agent	ı its registered office or regis	tered agent, or both, in the State of Flo	01/29/2021
POMPANO BEACH, FL 33069 US The above named entity submits this statement for the purpose of changing SIGNATURE: ANNA COSTA	n its registered office or regis	tered agent, or both, in the State of Flo	01/29/2021
POMPANO BEACH, FL 33069 US The above named entity submits this statement for the purpose of changing SIGNATURE: ANNA COSTA Electronic Signature of Registered Agent Authorized Person(s) Detail :			01/29/2021
POMPANO BEACH, FL 33069 US The above named entity submits this statement for the purpose of changing SIGNATURE: ANNA COSTA Electronic Signature of Registered Agent Authorized Person(s) Detail : Title MGR	Title	MGR	01/29/2021
POMPANO BEACH, FL 33069 US The above named entity submits this statement for the purpose of changing SIGNATURE: ANNA COSTA Electronic Signature of Registered Agent Authorized Person(s) Detail : Title MGR Name DICKINSON, MARIANNE P	Title Name	MGR COSTA, ANNA K 590 SW 12TH AVE	01/29/2021

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNA COSTA

VICE-PRESIDENT

01/29/2021

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L14000066462

Entity Name: RED ROAD STONE LLC

## **Current Principal Place of Business:**

FILED Jan 29, 2021 Secretary of State 7936082159CC

Electronic Signature of Signing Authorized Person(s) Detail

Date