

F01000003834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

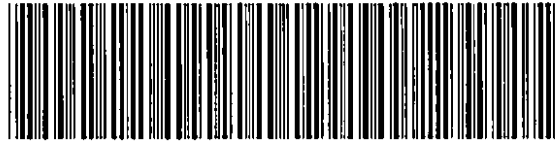
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



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2021 MAY -4 PM 12:32

SECRETARIAT OF STATE
FALL ADMINISTRATION

ED

2021 MAY -4 PM 12:41

SECRETARIAT OF STATE

MAY 05 2021

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 5/4/21

PRIORITY Routine

OUR REF.# (Order ID#) Bev

ORDER ENTITY Tompkins Associates-Integration Dimension, Inc.

PLEASE PERFORM THE FOLLOWING SERVICES:

Tompkins Associates-Integration Dimension, Inc.

Please file the attached amendment document and provide a certified copy.

NOTES:

\$43.75 Authorized

Email address for annual report reminders: lbailey@wyrick.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F01000003834

(Document number of corporation (if known))

1. _____
(Name of corporation as it appears on the records of the Department of State)
2. _____ North Carolina _____ 3. _____ July 1, 2001
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? April 6, 2021
5. _____
Tompkins Solutions, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)
- (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. **If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

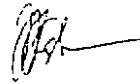
Signature of New Registered Agent, if changing

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STATE
SECRET, FL
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FD

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Jeffrey Kaplan

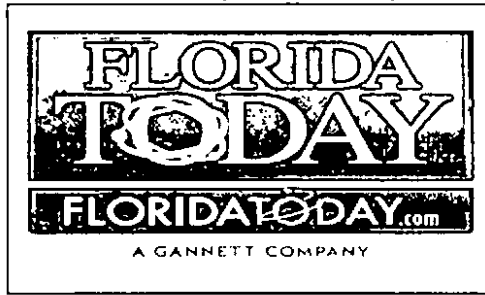
(Typed or printed name of person signing)

Chief Financial Officer

(Title of person signing)

FILING FEE \$35.00

A Daily Publication By:



INCORPORATING SERVICES, LTD.
1540 GLENWAY DRIVE

TALLAHASSEE, FL. 32301

AD#4698739 04/24/2021
NOTICE OF INTENTION TO REGISTER
FICTITIOUS NAME
Notice is hereby given that the under-
signed intends to register the fictitious
name of, Diamond M.T. Business Name as
provided by Section 865.09 Florida Stat-
utes Specialty Coating Systems Acquisi-
tion, LLC Name(s) of Owner(s) or
Director(s) Specialty Coating Systems Ac-
quisition, LLC Physical Address 7645
Horseland Dr. Indianapolis, IN 46278

STATE OF WISCONSIN COUNTY OF BROWN:
Before the undersigned authority personally appeared said
legal clerk, who on oath says that he or she is a Legal
Advertising Representative of the FLORIDA TODAY, a daily
newspaper published in Brevard County, Florida that the
attached copy of advertisement, being a Legal Ad in the
matter of

Fictitious Business

as published in FLORIDA TODAY in the issue(s) of:

04/24/2021

Affiant further says that the said FLORIDA TODAY is a
newspaper in said Brevard County, Florida and that the
said newspaper has heretofore been continuously
published in said Brevard County, Florida each day and has
been entered as periodicals matter at the post office in
MELBOURNE in said Brevard County, Florida, for a period of
one year next preceding the first publication of the attached
copy of advertisement; and affiant further says that he or
she has never paid nor promised any person, firm or
corporation any discount, rebate, commission or refund for
the purpose of securing this advertisement for publication
in the said newspaper.

Sworn to and Subscribed before me this 24th of April 2021,
by legal clerk who is personally known to me

Affiant

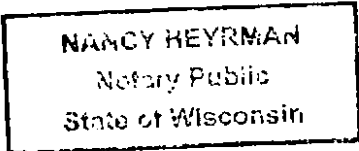
Notary State of Wisconsin County of Brown

5.15.23

My commission expires

Publication Cost: \$62.00
Ad No. 0004698739
Customer No: 8506567956A
This is not an invoice

of Affidavits 1





NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF NAME CHANGE

I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify that on the 6th day of April, 2021, an Articles of Amendment Business Corporation duly executed by the proper officer to change the corporate name of the business corporation named below with an effective date of 4/6/2021, were filed in this office:

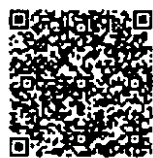
Name at time of submission of Articles of Amendment:

TOMPKINS ASSOCIATES, INC.

Name Changed To

TOMPKINS SOLUTIONS, INC.

I FURTHER CERTIFY that this certificate is in compliance with North Carolina General Statutes 55D-26 and may be recorded in the office of the Register of Deeds in the same manner as deeds, the former name of the corporation appearing in the "Grantor" index and the amended name of the corporation appearing in the "Grantee" index.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 9th day of April, 2021.

Elaine F. Marshall

Secretary of State