119000287470

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)
PICK-UP WAIT	MAIL
(Business Entity Name))
(Document Number)	
Certified Copies Certificates or	f Status
Special Instructions to Filing Officer:	

Office Use Only



800370280918

E IL E D 2021 AUG 16 AM 9: 26 SEGRETARY DE SEVIE





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	08/18/2021	
	Merritt Walker	
	1452943	
	305	S ASPHALT LLC
	es of Incorporation/Authoriza	
✓ Amer	ndment	
☐ Chan	ge of Agent	PLEASE RETAIN THE ORIGINAL
☐ Reins	statement	DATE OF SUBMISSION, 8/16/2021
Conv	ersion	
Merge	er	
☐ Disso	olution/Withdrawal	
☐ Fictiti	ous Name	
✓ Other	CERITIFED	COPY OF THE FILING EVIDENCE
Authorized A	Amount:\$55	
Signature:	mw	



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	08/18/2021		
Name:	Merritt Wal	ker	
Reference	#:14529	43	
Entity Nam	e:	305 ASPH	ALT LLC
	eles of Incorporation/		
✓ Ame	endment		
☐ Cha	nge of Agent	- · · · · ·	ASE RETAIN THE ORIGINAL
Reir	nstatement	DAT	E OF SUBMISSION, 8/16/2021
☐ Con	version		
☐ Mer	ger		
Diss	olution/Withdrawal		
☐ Ficti	tious Name		
✓ Othe	erCE	RITIFED COPY OF	THE FILING EVIDENCE
Authorized	Amount:	\$55	-
Signature:	ш	v	_

COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations			
	t LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	Name of Limited Liability Company d Articles of Amendment and fee(s) are submitted for filing. n all correspondence concerning this matter to the following: Eneida Bennett, Paralegal			
	Encida Bennett, Paralegal			
		Name of Person	<u> </u>	
	Hinckley, Allen & Snyder	LLP		
		Firm/Company		
100 Westminster Street, Suite 1500				
	 	Address		
	Providence, RI 02903			
	 	City/State and Zip Code		
	-			
	E-mail address: (to be used for future annual report not	Address te and Zip Code for future annual report notification) 401 457-5188	
For further information of	oncerning this matter, please c	all:		
Eneida Bennett, Paralega	al			
Name o	f Person	Area Code Daytim	E Telephone Number	
Enclosed is a check for th	ne following amount:			
	_	□ ecc on E31 . E . a	C econorius r	
☐ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
Mailing Addres		Street Address:		
Registration S		Registration Sec		
Division of C		Division of Cor		
P.O. Box 632	1	The Centre of T	alianassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

305 Asphalt LLC		
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)	_
The Articles of Organization for this Limited Liability Company were filed on Florida document number L19000287470	November 19, 2019 and	assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company h	here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:	ى 70	20.3
(Principal office address MUST BE A STREET ADDRESS)	SCS.	<u> </u>
	> 1/2 - 1/2	<u>a</u>
		σ <u> </u>
Enter new mailing address, if applicable:	<u>: 197</u>	
(Mailing address MAY BE A POST OFFICE BOX)	, ç; ;;	ني ني
	7 A	26
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	records, <u>enter the name of the r</u>	new registered
Name of New Registered Agent:		
New Registered Office Address:		
Enter Flat	orida street address	
<u> </u>	, Florida	
City	Zip Coo	le

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

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Richard Tischofer	7901 4th Street N, Ste. 300	
		St. Petersburg, FL 33702 US	\express Remove
			□Add
			□Remove
			Change
			200 AUG SEORETY TWILLA
			Ckemove
			□ Change □ Nddd
			□Remove
			Change
			□Add
			□Remove
			Change
			DAdd
			□ Remov e
			□ Change

-							
					<u> </u>	<u> </u>	
_							
***						.	
_							
-						(J)	202
-						TV RE	21 AUG
-						<u> </u>	<u></u>
_							
-						<u>四点</u> 产室	
•							
-							
_							
_					-		
	ve date, if other tha	this block does no	t meet the applicat	date of filing or more le statutory filing re	(optiona than 90 days after filin equirements, this da	l) 1g.) Pursua te will no	int to 605.02 of be listed
<u>note:</u>	ent's effective date on	во вершилси, с					
docum	ent's effective date on	-					
docum	ent's effective date on d specifies a delayed ei	-	ot an effective tim	e, at 12:01 a.m. on (the earlier of: (b)	The 90th	day after ti