# 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM J WEATHERSPOON

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# P16000079043

### Entity Name: PAVEMENT SOLUTIONS CORPORATION OF FLORIDA, INC.

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

206 GEORGE BISHOP PARKWAY MYRTLE BEACH, SC 29579

#### **Current Mailing Address:**

PO BOX 51752 MYRTLE BEACH. SC 29579 US

#### FEI Number: 81-3987852

# Name and Address of Current Registered Agent:

CHRISTINA RACHAEL WEATHERSPOON 11945 SW 98TH LANE MIAMI, FL 33186 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

Title DIR Name WILLIAM JEFF WEATHERSPOON Address 1732 POCONO STREET City-State-Zip: CONWAY SC 29529

Date

FILED Jun 27, 2020 Secretary of State 2397655589CC

Certificate of Status Desired: No

06/27/2020

Date

PRESIDENT