## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000003663

Entity Name: ASSOCIATED ASPHALT TRANSPORT, LLC

**Current Principal Place of Business:** 

2829 LAKELAND DRIVE FLOWOOD. MS 39232

**Current Mailing Address:** 

PO DRAWER 23028 JACKSON, MS 39225 US

FEI Number: 30-0335312 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 NORTH CALHOUN ST SUITE 4 TALLAHASSEE, FL 32301 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: SARAH WRIGHT, ASST. VICE PRESIDENT

04/29/2024

**FILED** Apr 29, 2024

**Secretary of State** 

8681952885CC

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Address

Title **MANAGER** Title **PRESIDENT** 

ASSOCIATED ASPHALT PARTNERS. Name Name NATION, PATRICK

HC

Address 2829 LAKELAND DRIVE 2829 LAKELAND DRIVE FLOWOOD MS 39232

City-State-Zip:

City-State-Zip: FLOWOOD MS 39232

Title VΡ Title CFO. VP

PATRICK, KRIS Name Name WALL, ALAN

Address 2829 LAKELAND DRIVE Address 2829 LAKELAND DRIVE

City-State-Zip: FLOWOOD MS 39232 City-State-Zip: FLOWOOD MS 39232

Title **TREASURER** Title **SECRETARY** 

Name HODGES, KENNETH E STONE, KATHRYN W Name Address 2829 LAKELAND DRIVE 2829 LAKELAND DRIVE Address

City-State-Zip: FLOWOOD MS 39232 City-State-Zip: FLOWOOD MS 39232

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.

04/29/2024 SIGNATURE: ALAN WALL **EXEC VP & CFO**