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: MARK SCHAROSCH

Electronic Signature of Signing Authorized Person(s) Detail

Δuth

Authorized i erson(s) Detail.					
Title	MGRM	Title	MGRM		
Name	SCHAROSCH, MARK A	Name	STOKES, RICHARD		
Address	1904 NW PINE TREE LN	Address	13810 STATION DRIVE		
City-State-Zip:	STUART FL 34994	City-State-Zip:	PLATTE CITY MO 64079		

SIGN

Entity Name: MAXAM CONTRACTING COMPANY LLC

Current Principal Place of Business:

1904 NW PINE TREE LN STUART, FL 34994

Current Mailing Address:

DOCUMENT# M1000004329

1904 NW PINE TREE LN STUART, FL 34994

FEI Number: 27-2289387

Name and Address of Current Registered Agent:

SCHAROSCH, MARK A 1904 NW PINE TREE LN STUART, FL 33994 US

above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
NATURE:	MARK A SCHAROSCH			01/21/2017	
	Electronic Signature of Registered Agent			Date	
horized Person(s) Detail :					

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 21, 2017 Secretary of State CC1957644850

Certificate of Status Desired: No

MEMBER

Date