

F01000003834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

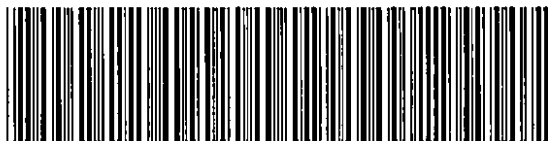
(Business Entity Name)

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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2021 MAY -4 PM 12:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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. \_\_\_\_\_  
Tompkins Associates-Integration Dimension, Inc.  
(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  
\_\_\_\_\_  
Tompkins Solutions, Inc.
5. \_\_\_\_\_  
(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.*

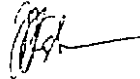
\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

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PM 12:41  
FID

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

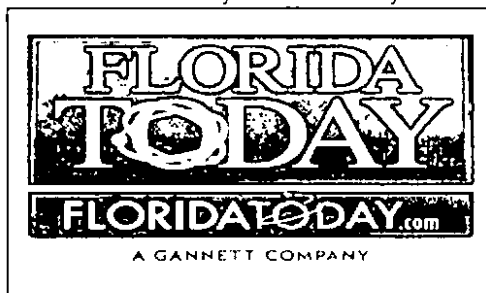
(Typed or printed name of person signing)

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  
Woodland 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

NANCY HEYRMAN  
Notary Public  
State of Wisconsin



# NORTH CAROLINA

## Department of the Secretary of State

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### 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**