

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





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2018 DEC -7 PM 4: 37 SECRETARY OF STATE TALL ARASSEE FI

R. WHITE DEC 13 2018



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com\_

Date: December 5, 2018

Order#: 497154-145

Re: SUPERIOR ASPHALT, INC.

Enclosed please find:

XX \_\_ Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA . XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607. mge is submitted for a corp r to change its registered o	ooration organized	d under the laws of the Stat	te of Mississippi	_
1. The name of t	he corporation: FLORIDA	SAI, INC.			
2. The principal	office address: 5990 I-55	South, Byram, M	39272		
· · · · ·					
3. The mailing a	ddress (if different): Post	Office Box 72009	9, Byram, MS 39272		
4. Date of incorporation/qualification: 06/28/2007 Document number: F07000003292					
	I street address of the curre tment of State: (If resigned		t and registered office on f	file with the	
	C T Corporation System				
	1200 South Pine Island Road				
	Plantation, FL 33324  Plantation, FL 33324  Plantation				-71
6. The name and (if changed):	I street address of the new	C-7 PM			
	Corporation Service Com	npany			
	1201 Hays Street				
P.O. Box NOT acceptable					
	Tallahassee		FL 32301		
The street addre	ess of its registered office be identical.	and the street add	ress of the business office	e of its registered ag	ent.
Such change wa	is authorized by resolution ie board, or the corporatio	n duly adopted by n has been notific	its board of directors or bed in writing of the change	y an officer so	
<u> Xiee</u>	2 agnie	Ji	ll Cilmi, Vice President		
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	te of an officer or director the appointment as regist to comply with the provisi my duties, and I am famil- is document is being filed that the corporation has b n Service Company	ons of all statutes iar with and acce merely to reflect	relative to the proper and pt the obligation of my po a change in the registered	) d complete sition as revistered	
By: Sign	nature of Registered Agent	1:	2/04/2018 Date		_
	half of an entity:				
Ami M. Casper,	Asst. Vice President				
	ped or Printed Name				