

L05000015581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

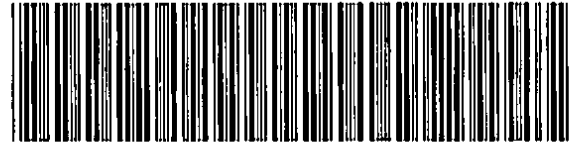
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2019

AAA TOP QUALITY ASPHALT, L.L.C.
6131 DUBOIS ROAD 33811
LAKELAND, FL 33811

SUBJECT: AAA TOP QUALITY ASPHALT, L.L.C.
Ref. Number: L05000015581

We have received your document for AAA TOP QUALITY ASPHALT, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 219A00011956

COVER LETTER

TO: Registration Section
Division of Corporations

PLEASE PROCESS REINSTATEMENT PAYMENT
INCLUDED

SUBJECT: AAA TOP QUALITY ASPHALT, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAMELA J SPIKER

Name of Person

AAA TOP QUALITY ASPHALT HOLDINGS, LLC

Firm/Company

6131 DUBOIS ROAD 33811

Address

LAKELAND, FL 33811

City/State and Zip Code

PAMELASPIKER7@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VINCENT COELHO, CPA

321 229-7277
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AAA TOP QUALITY ASPHALT, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/11/05 and assigned
Florida document number L05000015581.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

AAA TOP QUALITY ASPHALT HOLDINGS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

6131 DUBOIS ROAD

(Principal office address MUST BE A STREET ADDRESS)

LAKELAND, FL 33811

Enter new mailing address, if applicable:

6131 DUBOIS ROAD

(Mailing address MAY BE A POST OFFICE BOX)

LAKELAND, FL 33811

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NO CHANGE

New Registered Office Address:

6131 DUBOIS ROAD

Enter Florida street address

LAKELAND

City

Florida 33811

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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JUN 10 2019
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: _____ (optional)

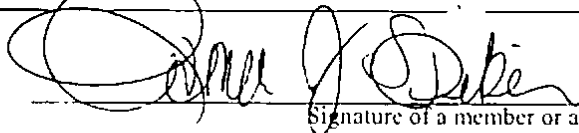
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated MAY 24 2019



Signature of a member or authorized representative of a member

PAMELA J SPIKER

Typed or printed name of signee