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SECRETARY SESTATE

ALLABASSES

JAN 0 4 2016 S. YOUNG

COVER LETTER

Division of Co	rporations			
	ety Surfacing, LLC			
SURJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Leonidas Maldonado			
	· · · · · · · · · · · · · · · · · · ·	Name of Person		
	A & W Safety Surfacing, I	TC		
		Firm/Company		
	1705 Cowart Road			
		Address		
	Plant City, Florida 33567			_
	leonidasmaldonado71@gm	City/State and Zip Code ail.com		17
	E-mail address: (to be used for future annual report notifica	ation) SS C	
For further information of	concerning this matter, please ca	ali:); 00	
Laninas m	AWOUADO	516 315-2392 at ()	elephone Number	
		The odd Dayano 7	orephone (value)	
Enclosed is a check for t	he 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

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

TO ARTICLES OF ORGANIZATION OF

A & W Safety Surfacing, LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on and assigned
Florida document number LOWOOO 77903	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
	計画 周 円
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	
	RATE 09
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, enter the name of the
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code

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>	Address	Type of Action
МВ	Wilmer Soto	1705 Cowart Road	Add
		Plant City, Florida 33567	■ Remove
			□ Change
Off MGR	Eva Ruiz	1705 Cowart Road	□ Add
		Plant City, Florida 33567	■ Remove
			Change
Off. Asst.	Maria S. Ruiz	1703 Oakwood Estates Drive	
		Plant City, Florida 33567	Remove
			☐ Change
			Z S
			AND THE PROPERTY OF THE PROPER
			OF CHANGE
			<u>≯FT</u> <u>G</u> Add
			☐ Remove
		-	☐ Change
			□ Add
			□ Remove
			□ Change

te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tument's effective date on the Department of State's records.			
ective date, if other than the date of filing:	*		
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record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the parlier of the 90th day after the record is filed. December 16 December 16 December 16 December 16 Signature of a member or authorized representative of a member			
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The 90th day after the record is filed. December 16 Signature of a member or authorized representative of a member	n effective date is listed, the date must be specified. If the date inserted in this block d	pecific and cannot be prior to date of filing or mo oes not meet the applicable statutory filing	ore than 90 days after filing.) Pursuant to 605.0207
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		Leonidas Maldonado)

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Filing Fee: \$25.00