Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000128477 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023
Phone: (850)205-8842
Fax Number: (850)878-5368

**Enter the email address for this business entity to be used for future, annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE TREMRON LAKELAND, LLC

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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	Tremron Lakeland, LLC				
	Nan	ne of Limited	Liability Company		
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Off	ice Change a	and fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to ti	he following:		
Lorna	J. Virts				
	Name of Person				
Smith,	Gambrell & Russell, LLP				
	Firm/Company				
1230 F	Peachtree Street, N.E.,				
	Address				
Atlanti	a, GA 30309				
	City/State and Zip Code	-			
mtoml	inson@quikrete.com				
Ī	2-mail address: (to be used for future ann	nual report no	otification)		
For fu	rther information concerning this matter,	, please call:			
Loma	Virts	404 at (815-3580		
	Name of Person		Area Code & Daytime Telephone Nur	nber	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
	Enclosed is a check for the following amount:				
	■ \$25 Filing Fee	۵	\$55 Filing Fee & Certified Copy		
INH\$1	8 (2/14)				

5/24/2016 3:26:29 PM From: To: 8506176383(3/3)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	ame of the limited liability company:			
4. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			tailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)
	3490 Piedmont Rd NE, Suite 1300		3490 Piedmo	ont Rd NE, Suite 1300
	Atlanta, GA 30305		Atlanta, GA	30305
	03/16/2011		L1100003216	60
3.	Date of filing/registration in Florida	4.	Γ	Document number
5. (a)	Registered Agent and Registered Office shown on the records of			
	Registered Agent and Registered Office shown on the records of	the Plori	la Dept. of State:	:
	Caron, Hugues			
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRES	<u>(S)</u>	200
	2885 St. Clair Street		<u></u>	
	Jacksonville , FL	32254		
	, I I	'		
(b)	Enter name of NEW Registered Agent and/or NEW Registered			
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	
	C T Corporation System			※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※ ※
				⊙m ∞ >
	NEW Registered Office Address: 1200 South Pine Island Road			
	1200 South Pine Island Road			
	Plantation , FL	33324		
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lierc authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member	the reg ability of the li- limited Da	istered office a company, it is b mited liability liability comp vid T. Jones, CF emron, LLC, solo	and the business office of the register hereby confirmed that the change(s) company or as otherwise provided in pany. FO of Tremron US, Inc., sole member of
I here provisi the obl to mere notified	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change. Corporation System	perfori d for in hereby	nance of my di Chapter 605, confirm that th	ncity. I further agree to comply with t htties, and I am familiar with and acc I.S. Or, if this document is being fil he limited liability company has been

Signature of Registered Agent