

#L11000039668

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(Business Entity Name)

(Document Number)

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11 AUG 25 PM 1:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PAVEMENT ANALYTICS, 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:

BRUCE T DIETRICH

Name of Person

PAVEMENT ANALYTICS, LLC

Firm/Company

PO Box 670

Address

TALLAHASSEE, FL 32302

City/State and Zip Code

bdietch@pavementanalytics.com

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

For further information concerning this matter, please call:

WILEY CUNAGIN

Name of Person

at 850 212 6309

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

FILED

PAVEMENT ANALYTICS, LLC

11 AUG 25 PM 1:58

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on APRIL 4, 2011 and assigned  
Florida document number L11000039668.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

BRUCE DIETRICH

New Registered Office Address:

3700 CAPITAL CIRCLE SE 415

Enter Florida street address

TALLAHASSEE

City

Florida

FL

32302

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 608, 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.

Bruce Dietrich

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	DENISE HOYT	PO Box 670 TALLAHASSEE FL 32302	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	BRUCE DIETRICH	PO Box 670 TALLAHASSEE FL 32302	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	HARSHAD DESAI	PO Box 670 TALLAHASSEE FL 32302	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	WILEY D CUNAGIN	3539 APALACHEE PARKWAY TALLAHASSEE FL 32302	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated AUGUST 24, 2011.

Wiley D Cunagin  
Signature of a member or authorized representative of a member  
WILEY D CUNAGIN  
Typed or printed name of signee