

L11 000040528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900199357429

04/05/11--01015--021 **25.00

RECEIVED

11 APR - 5 PM 1:45

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 APR - 5 PM 1:46

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

T. CLINE

APR - 5 2011

EXAMINER

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Paving And Construction 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

4-5-11

FILED
11 APR - 5 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida document number 211000040528

This amendment is submitted to amend the following:

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

Tallahassee Asphalt Repair LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3839 North Monroe St
Tall. Fl. 32304

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Po Box 180971
Tallahassee, Fl. 32318

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:

Donna Ross

New Registered Office Address:

3839 North Monroe St.

Enter Florida street address

Tallahassee

Florida

32304

City

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.

Donna Ross
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

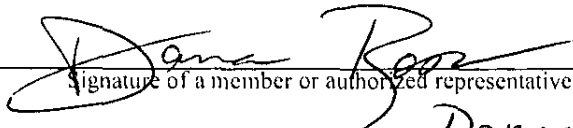
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------|----------------------------------|--|
| MGR | Donna Ross | PO Box 180971 Tall. Fl. 32318 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGRM | Sid Lingerfelt | PO Box 180971 Tall. Fl. 32318 | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

FILED
 11 APR - 5 PM 46
 SEAL
 ALABAMA SECRETARY OF STATE

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

Dated 4-5-11


 Signature of a member or authorized representative of a member
Donna Ross
 Typed or printed name of signee