## L17000005159

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(Address)
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(City/State/Zip/Phone #)
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SECRETARY OF STATE OF CORPORATIONS

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## **COVER LETTER**

TO: Registration		SHEELIEK	
***************************************	Section		
	Corporations		
SUBJECT PAV	ement Maid	ing Systems, Lo	
SOBJECT: TOW	CITIETT MONTO	ing Justems Li	′ (
	Name of t	imited Liability Company	
The enclosed Articles of	of Amunda		
a.	of Amendment and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
	March	US Radu Name of Person	
	MAY1	US Kadu	
		Name of Person	<del></del>
	Paraman	+ Marling Syste	<b>A</b>
	IOVETIKI	11 Maricing Suste	ins, LlC.
	2143 13/	ICK Lake Blvd.	
		Address Address	<del></del>
	WinterCo	arden, FL. 3478	η
		City/State and Zip Code	
		, was supposed	
	E-mail address: (	to be used for future annual report notif	ication)
For further information co	oncerning this matter, please co	-11.	cation,
		411;	
Marius Ro	adu	427 201	CCIi
Name of	— <del>——</del> ———	$\underline{\qquad} \text{at} \left( \frac{40+}{100} \right) \underline{\qquad} \frac{101}{100}$	-6611
		Alea Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee &	□ \$55.00 till till	
1	Certificate of Status	□ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Fee,
		(additional copy is enclosed)	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

Favement Marking	Bystems, LL	C .
(Name of the Limited Liability Compa (A Florida Limited	nivas it now appears on our re Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1700005159</u> .	were filed on Januari	16.2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)		<del></del>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		FILED SIDW OF CORPU
B. If amending the registered agent and/or registered o		cords, enter the name of the new
<del></del>	_	
Name of New Registered Agent:  New Registered Office Address:		
The The Registered Office (Address).	Enter Florida street d	. Florida
	Ciţy	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>	Address	Type of Action
MGR	Marius Radu	2143 Blade Lake Blvd	🗆 Add
		Winter Garden, Fl 3478	7 Remove
			Change
AMBR	Radu, Marius	2143 Black lalu Bluc	Add
		Winter Garden. FL 347	87 □ Remove
			Change
MAR	Normann, Anca	2143 Bladi Lalu Blvd	🖸 Add
		Winter Garden. Fr. 3471	Remove
			□ Change
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