## M09000004377

(Re	questor's Name)	_
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	siness Entity Na	me)
(50	isiness Litity Ivai	me)
(Do	cument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400263753584

08/27/14--01017--012 \*\*25.00

SEP 04 2015 T. LEMIEUA



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: August 25, 2014

Order#: 258215-018

Re: BITUMINOUS TECHNOLOGIES, LLC

Enclosed please find:

XX \_\_ Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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

1.	Name of the limited liability of	company: BITUMINOUS	S TECHNO	LOGIES, LLC				
2. (a)	2677 Roanoke Avenue, S.W.		A	o) 2677 Roand	2677 Roanoake Avenue, S.W.  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailin				
	ROANOKE	V/ 24015		Roanoke	VA	24015		
2	11/05/2009			M0900000437	<del></del>			
3.	Date of filing/regi	istration in Florida	4.	Doc	ument numb	er		
5. (a	C T Corporation System	n						
`	Registered Agent and Registered	Office shown on the records	of the Florida	Dept. of State:				
	1200 South Pine Island F	Road						
		MUST BE FLORIDA STREE	T ADDRESS	5)		t		
	_			_				
						SEC	7	
	Plantation	. 1	FL 33324	1		AE AE	AUG	
		7 -				TAR	2 <u>m</u>	
(b	) Corporation Service Com	nany				SEY SE	7	
(0)	Enter name of <u>NEW Registered</u>		red Office ad	dress:		<u>.                                    </u>	<b>H</b>	
			•			FLORID	0± :†	
	1201 Hays Street					DRAT	£	
	NEW Registered Office Addres					DΑ	0	
	Tallahassee	,1	FL <u>32301</u>					
the chagent was/v	limited liability company is nange or changes are made, the will be identical. Or, in the were authorized by an affirmaticles of organization or the	he Florida street address case of a Florida limited ative vote of the members	of the regi liability cos s of the lim	stered office and ompany, it is here lited liability con	the business by confirment opany or as	s office of the led that the cl	nt after registered e(s) ed in	
	0-8-		Dor	a Priebe, Author	ized Person			
Sign	ature of a member or authorized re	presentative of a member		Print	ed or typed nar	me of signee •		
provi. the ol to me	eby accept the appointment of sions of all statutes relative to bligations of my position as rely reflect a change in the red in writing of this change.	is registered agent and a o the proper and comple egistered agent as provid egistered office address,	igree to act le perform ded for in ( I hereby c	in this capacity. ance of my dutie. Chapter 605, F.S onfirm that the li	I further a s, and I am f Or, if this mited liabili	gree to comply amiliar with a document is b ity company ha	with the and accept eing filed as been	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Assistant Vice President